



New Hanover
Health Advantage

FirstCarolinaCare

2025 Formulary

(List of Covered Drugs or “Drug List”)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.

This formulary was updated on 7/01/2025, Version 17. For more recent information or other questions, please contact FirstCarolinaCare Member Services at (855) 291-9336 (TTY users should call 711), 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit FirstCarolinaCare.com/NHHA.

Note to existing members: This Formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take. When this document says “we,” “us,” or “our,” it means FirstCarolinaCare Insurance Company. When it says “plan” or “our plan,” it means New Hanover Health Advantage. This document includes a Drug List (Formulary) for our plan which is current as of 7/01/2025, Version 17. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network and/or copayments/coinsurance may change on January 1, 2025, and from time to time during the year.

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call (855) 291-9336 (TTY: 711).

ATENCIÓN: Si habla Español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame (855) 291-9336 (TTY: 711).

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New Hanover FirstCarolinaCare HMO-POS Formulary 00025411 Version 17

What is the FirstCarolinaCare formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by FirstCarolinaCare in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program.

FirstCarolinaCare will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a FirstCarolinaCare network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the formulary change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: www.firstcarolinacare.com/medicare/pharmacy

Changes that can affect you this year:

In the below cases, you will be affected by coverage changes during the year:

Changes that can affect you this year:

In the below cases, you will be affected by coverage changes during the year:

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a new generic drug to replace a brand-name drug currently on the formulary, or add a new biosimilar to replace an original biological product currently on the formulary, or add new restrictions or move a drug we are keeping on the formulary to a higher cost-sharing tier or both after we add a corresponding drug. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30 day supply of the drug and notice of the change.

If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the FirstCarolinaCare Formulary?”

Changes that will not affect you if you are currently taking the drug.

Generally, if you are taking a drug on our 2025 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 7/01/2025, Version 17. To get updated information about the drugs covered by FirstCarolinaCare, please contact us. Our contact information appears on the front and back cover pages. If there are negative changes made to the printed drug list within the covered year, you may be notified by mail identifying the changes. Drug lists located on our website are reviewed and updated on a monthly basis.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents.” If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 74. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

FirstMedicare Direct covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

- For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** FirstCarolinaCare requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from FirstCarolinaCare before FirstCarolinaCare will cover your prescriptions. If you don’t get approval, FirstCarolinaCare may not cover the drug.
- **Quantity Limits:** For certain drugs, FirstCarolinaCare limits the amount of the drug that FirstCarolinaCare will cover. For example, FirstCarolinaCare provides 18 tablets per prescription of citalopram. This may be in addition to a standard one-month or three-month supply.

- **Step Therapy:** In some cases, FirstCarolinaCare requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, FirstCarolinaCare may not cover Drug B unless you try Drug A first. If Drug A does not work for you, FirstCarolinaCare will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask FirstCarolinaCare to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the FirstCarolinaCare formulary?” on page iii for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that FirstCarolinaCare does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by FirstCarolinaCare. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by FirstCarolinaCare.
- You can ask FirstCarolinaCare to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to FirstCarolinaCare's formulary?

You can ask FirstCarolinaCare to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, FirstCarolinaCare limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at a lower cost-sharing level, unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, FirstCarolinaCare will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us for a tiering or formulary exception, including an exception to a coverage restriction. **When you request an exception your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

FirstCarolinaCare provides transition fills for members who have a level-of-care change from one treatment setting to another. Please visit our website at FirstCarolinaCare.com/NHHA for further details.

For more information

For more detailed information about your FirstCarolinaCare prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about FirstCarolinaCare, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

FirstCarolinaCare Formulary

The formulary below provides coverage information about the drugs covered by FirstCarolinaCare. If you have trouble finding your drug in the list, turn to the Index that begins on page 72.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., TRADJENTA) and generic drugs are listed in lower-case italics (e.g., *atorvastatin*).

The information in the Requirements/Limits column tells you if FirstCarolinaCare has any special requirements for coverage of your drug.

Drug Name	Drug Tier	Requirements/Limits
Ophthalmic Agents		
Ophthalmic Agents		
CYSTARAN	5	PA, QL: 60 ML per 28 days

B/D This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

EA Each.

PA Prior Authorization. FirstCarolinaCare requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from FirstCarolinaCare before your prescription will be covered by FirstCarolinaCare. If you don't get approval, FirstCarolinaCare may not cover the drug.

QL

Quantity Limit. For certain drugs, FirstCarolinaCare limits the amount of the drug that FirstCarolinaCare will cover. For example, FirstCarolinaCare provides 30 tablets per prescription for naratriptan hcl. This may be in addition to a standard one-month or three-month supply.

ST

Step Therapy. In some cases, FirstCarolinaCare requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, FirstCarolinaCare may not cover Drug B unless you try Drug A first. If Drug A does not work for you, FirstCarolinaCare will then cover Drug B.

PANSO

Prior Authorization for New Starts Only

ST NSO

Step Therapy for New Starts Only.

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
celecoxib caps	2	
diclofenac sodium dr	1	
diclofenac sodium er	1	
diclofenac sodium/misoprostol tbec 75mg; 200mcg	2	
diclofenac sodium gel 1%	2	
diclofenac sodium external soln 1.5%	4	PA
etodolac er	2	
fenoprofen calcium caps 400mg	1	
fenoprofen calcium tabs	1	
flurbiprofen tabs	1	
ibu	1	
ibuprofen susp	1	
ibuprofen tabs 400mg, 600mg, 800mg	1	
ketorolac tromethamine inj 15mg/ml, 30mg/ml	2	
meclofenamate sodium caps	1	
mefenamic acid caps	2	
meloxicam tabs	1	
nabumetone tabs	1	
naproxen sodium tabs 550mg	1	
naproxen susp	5	
naproxen tabs 250mg, 375mg, 500mg	1	
oxaprozin tabs	2	
piroxicam caps	2	
salsalate tabs	2	
sulindac tabs	1	
Opioid Analgesics, Long-acting		
buprenorphine ptwk 10mcg/hr, 15mcg/hr, 5mcg/hr, 7.5mcg/hr	2	
buprenorphine ptwk 20mcg/hr	4	
fentanyl pt72 25mcg/hr	2	QL(10 EA per 30 days)
fentanyl pt72 12mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr	4	QL(10 EA per 30 days)
fentanyl pt72 100mcg/hr	4	QL(20 EA per 30 days)
fentanyl pt72 87.5mcg/hr	5	QL(10 EA per 30 days)
methadone hcl inj	2	
methadone hcl oral soln	2	QL(1800 ML per 30 days)
methadone hcl tabs	2	QL(360 EA per 30 days)
methadone hydrochloride intensol	2	QL(1800 ML per 30 days)
methadone hydrochloride conc	2	QL(1800 ML per 30 days)
methadose sugar-free	2	QL(1800 ML per 30 days)
methadose conc 10mg/ml	2	QL(1800 ML per 30 days)
morphine sulfate er cp24 100mg, 10mg, 20mg, 30mg, 50mg, 60mg, 80mg	2	QL(60 EA per 30 days)

Formulary ID: 25411, Version: 17, Effective: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate er tbcr</i>	2	QL(120 EA per 30 days)
OXYCODONE HYDROCHLORIDE ER T12A 40MG	2	QL(60 EA per 30 days)
OXYCODONE HYDROCHLORIDE ER T12A 80MG	5	QL(60 EA per 30 days)
<i>oxycodone hydrochloride er t12a 10mg, 20mg</i>	2	QL(60 EA per 30 days)
OXYCONTIN T12A	4	QL(60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 30mg</i>	4	QL(120 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 10mg, 15mg, 20mg, 5mg, 7.5mg</i>	4	QL(60 EA per 30 days)
<i>oxymorphone hydrochlorideer</i>	4	QL(120 EA per 30 days)
<i>tramadol hcl er cp24 100mg, 200mg, 300mg</i>	4	QL(60 EA per 30 days); ST
<i>tramadol hcl er tb24</i>	4	QL(30 EA per 30 days); ST
<i>tramadol hydrochloride er</i>	4	QL(30 EA per 30 days); ST
Opioid Analgesics, Short-acting		
<i>acetaminophen/codeine phosphate tabs 300mg; 60mg</i>	2	QL(180 EA per 30 days)
<i>acetaminophen/codeine phosphate tabs 300mg; 15mg, 300mg; 30mg</i>	2	QL(360 EA per 30 days)
<i>acetaminophen/codeine soln</i>	2	QL(4500 ML per 30 days)
<i>acetaminophen/codeine tabs 300mg; 60mg</i>	2	QL(180 EA per 30 days)
<i>acetaminophen/codeine tabs 300mg; 15mg, 300mg; 30mg</i>	2	QL(360 EA per 30 days)
<i>ascomp/codeine</i>	2	
<i>butalbital/acetaminophen/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg</i>	2	
<i>butalbital/aspirin/caffeine/codeine</i>	2	
<i>butorphanol tartrate inj</i>	2	
<i>butorphanol tartrate nasal soln</i>	2	QL(5 ML per 28 days)
CODEINE SULFATE TABS 60MG	4	QL(180 EA per 30 days)
<i>codeine sulfate tabs 15mg, 30mg</i>	2	QL(180 EA per 30 days)
<i>duramorph</i>	2	
<i>endocet tabs 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>fentanyl citrate oral transmucosal lpop 200mcg</i>	4	QL(120 EA per 30 days); PA
<i>fentanyl citrate oral transmucosal lpop 1200mcg, 1600mcg, 400mcg, 600mcg, 800mcg</i>	5	QL(120 EA per 30 days); PA
<i>hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 7.5mg/15ml</i>	2	QL(2700 ML per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 300mg; 10mg, 300mg; 5mg, 300mg; 7.5mg, 325mg; 10mg, 325mg; 5mg</i>	2	QL(240 EA per 30 days)
<i>hydrocodone/acetaminophen tabs 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>hydrocodone(ibuprofen tabs 7.5mg; 200mg</i>	2	QL(150 EA per 30 days)
<i>hydrocodone(ibuprofen tabs 10mg; 200mg, 5mg; 200mg</i>	4	QL(150 EA per 30 days)
<i>hydromorphone hcl liqd</i>	2	QL(1200 ML per 30 days)
<i>hydromorphone hcl inj 10mg/ml, 1mg/ml, 4mg/ml</i>	2	
<i>hydromorphone hcl tabs 8mg</i>	2	QL(120 EA per 30 days)
<i>hydromorphone hcl tabs 2mg, 4mg</i>	2	QL(180 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
hydromorphone hydrochloride inj 2mg/ml, 50mg/5ml	2	
morphine sulfate tabs	2	QL(180 EA per 30 days)
MORPHINE SULFATE INJ 2MG/ML	2	
MORPHINE SULFATE INJ 10MG/ML, 2MG/ML, 4MG/ML	2	
morphine sulfate inj 10mg/ml, 4mg/ml, 5mg/ml, 8mg/ml	2	B/D
morphine sulfate inj 0.5mg/ml, 10mg/ml, 1mg/ml, 2mg/ml, 4mg/ml, 8mg/ml	2	
morphine sulfate oral soln 100mg/5ml	2	QL(200 ML per 30 days)
morphine sulfate oral soln 20mg/5ml	2	QL(300 ML per 30 days)
morphine sulfate oral soln 10mg/5ml	2	QL(700 ML per 30 days)
nalbuphine hydrochloride	1	
oxycodone hcl caps	2	QL(180 EA per 30 days)
oxycodone hydrochloride soln	2	QL(1300 ML per 30 days)
oxycodone hydrochloride caps, tabs	2	QL(180 EA per 30 days)
oxycodone hydrochloride conc	2	QL(180 ML per 30 days)
oxycodone/acetaminophen tabs 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg	2	QL(240 EA per 30 days)
oxymorphone hydrochloride	2	QL(180 EA per 30 days)
tramadol hydrochloride/acetaminophen	2	QL(240 EA per 30 days)
tramadol hydrochloride tabs 100mg	2	QL(120 EA per 30 days)
tramadol hydrochloride tabs 50mg	2	QL(240 EA per 30 days)
Anesthetics		
Local Anesthetics		
glydo	1	QL(30 ML per 30 days); PA
lidocaine hcl jelly prsy	1	QL(30 ML per 30 days); PA
lidocaine hcl inj 0.5%, 1.5%, 4%	1	
lidocaine hcl prsy 2%	1	QL(30 ML per 30 days); PA
lidocaine hydrochloride external soln	1	QL(250 ML per 30 days); PA
lidocaine hydrochloride inj 1%, 2%	1	
lidocaine/prilocaine crea	2	QL(60 GM per 30 days); PA
lidocaine oint 5%	2	QL(150 GM per 30 days); PA
lidocaine ptch 5%	2	PA
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
acamprosate calcium dr	2	
disulfiram tabs	2	
naltrexone hydrochloride tabs	1	
VIVITROL	5	
Opioid Dependence		
buprenorphine hcl/naloxone hcl	2	QL(90 EA per 30 days)
buprenorphine hcl subl	2	QL(90 EA per 30 days)
buprenorphine hcl inj	4	
buprenorphine hydrochloride/naloxone hydrochloride film	2	QL(90 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
buprenorphine hydrochloride/naloxone hydrochloride subl 2mg; 0.5mg	2	QL(90 EA per 30 days)
lofexidine hydrochloride	5	
LUCEMYRA	5	
Opioid Reversal Agents		
naloxone hcl inj 4mg/10ml	1	
naloxone hydrochloride liqd	2	
naloxone hydrochloride inj 0.4mg/ml, 2mg/2ml	1	
OPVEE	3	
Smoking Cessation Agents		
bupropion hydrochloride er (sr) tb12 150mg	2	
NICOTROL INHALER	4	QL(480 EA per 30 days)
varenicline starting month	2	
varenicline tartrate tabs 1mg	2	
varenicline tartrate tabs 0.5mg	2	
Antibacterials		
Aminoglycosides		
amikacin sulfate inj 1gm/4ml, 500mg/2ml	2	
ARIKAYCE	5	QL(525 ML per 30 days); PA
gentamicin sulfate pediatric	1	
gentamicin sulfate/0.9% sodium chloride inj 1.2mg/ml; 0.9%, 1.6mg/ml; 0.9%, 1mg/ml; 0.9%, 2mg/ml; 0.9%	1	
gentamicin sulfate crea 0.1%	2	
gentamicin sulfate inj 40mg/ml	1	
gentamicin sulfate oint 0.1%	2	
isotonic gentamicin inj 0.8mg/ml; 0.9%	1	
neomycin sulfate	2	
neomycin/polymyxin b sulfates	2	
STREPTOMYCIN SULFATE INJ 1GM	5	
tobramycin sulfate inj 1.2gm/30ml, 1.2gm, 40mg/ml	2	
tobramycin sulfate inj 10mg/ml, 80mg/2ml	4	
ZEMDRI	5	
Antibacterials, Other		
aztreonam inj 1gm	2	
aztreonam inj 2gm	5	
chloramphenicol sodium succinate	1	
clindacin etz pledges	2	
clindamycin hcl caps 300mg	1	
clindamycin hydrochloride caps 150mg, 75mg	1	
clindamycin palmitate hydrochloride	1	
clindamycin phosphate/dextrose	2	
clindamycin phosphate crea 2%	2	
clindamycin phosphate inj 600mg/4ml, 9000mg/60ml, 900mg/6ml	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate swab 1%</i>	2	
<i>colistimethate sodium</i>	5	
<i>daptomycin</i>	5	
DAPTOMYCIN/SODIUM CHLORIDE	4	
<i>fosfomycin tromethamine</i>	2	
IMPAVIDO	5	
KIMYRSA	5	
<i>lincomycin hydrochloride</i>	2	
<i>linezolid tabs</i>	4	QL(56 EA per 28 days)
<i>linezolid susr</i>	5	QL(1800 ML per 28 days)
<i>linezolid inj 600mg/300ml</i>	4	
<i>methenamine hippurate</i>	2	
<i>metronidazole vaginal</i>	2	
<i>metronidazole caps 375mg</i>	1	
<i>metronidazole inj 500mg/100ml</i>	1	
<i>metronidazole tabs 250mg, 500mg</i>	1	
<i>nitrofurantoin macrocrystals</i>	2	
<i>nitrofurantoin monohydrate/macrocrys</i>	2	
<i>nitrofurantoin monohydrate caps</i>	2	
NUVESSA	4	
ORBACTIV	5	
<i>polymyxin b sulfate inj</i>	2	
SIVEXTRO INJ	5	QL(6 EA per 30 days)
<i>tigecycline</i>	5	
<i>tinidazole</i>	4	
<i>trimethoprim tabs</i>	1	
<i>vancomycin hcl inj 0.9%; 1gm/200ml, 10gm</i>	4	
<i>vancomycin hydrochloride/dextrose inj 5%; 1gm/200ml, 5%; 500mg/100ml, 5%; 750mg/150ml</i>	4	
<i>vancomycin hydrochloride caps</i>	4	
VANCOMYCIN HYDROCHLORIDE INJ 1250MG/250ML, 1750MG/350ML, 750MG/150ML	4	
<i>vancomycin hydrochloride inj 1.75gm, 1000mg/200ml, 1gm, 2gm, 500mg, 5gm, 750mg</i>	4	
<i>vancomycin inj 0.9%; 500mg/100ml, 0.9%; 750mg/150ml</i>	4	
Beta-lactam, Cephalosporins		
AVYCAZ	5	
<i>cefaclor er tb12 500mg</i>	2	
<i>cefaclor caps</i>	2	
<i>cefaclor susr 250mg/5ml</i>	2	
<i>cefadroxil</i>	2	
<i>cefazin sodium/dextrose inj 3gm; 2%</i>	2	
<i>cefazin sodium/dextrose inj 1gm; 4%, 2gm; 3%</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>cefazolin sodium inj 100gm, 10gm, 1gm/50ml; 4%, 1gm, 300gm, 500mg</i>	2	
CEFAZOLIN/DEXTROSE INJ 3GM/150ML; 4%	2	
CEFAZOLIN INJ 2GM	2	
<i>cefazolin inj 2gm, 3gm</i>	2	
<i>cefdinir</i>	2	
CEFEPIME	3	
CEFEPIME HYDROCHLORIDE INJ 100GM, 2GM	3	
CEFEPIME/DEXTROSE	3	
<i>cefixime</i>	2	
CEFOTAXIME SODIUM INJ 1GM	1	
<i>cefotaxime sodium inj 2gm</i>	1	
<i>cefotetan inj 1gm, 2gm</i>	1	
<i>cefoxitin sodium</i>	1	
<i>cefpodoxime proxetil</i>	2	
<i>ceprozil</i>	2	
<i>ceftazidime inj 1gm, 2gm, 6gm</i>	1	
<i>ceftriaxone in iso-osmotic dextrose inj 20mg/ml; 0</i>	4	
<i>ceftriaxone sodium inj 10gm, 1gm, 250mg, 2gm, 500mg</i>	4	
<i>ceftriaxone/dextrose</i>	4	
<i>cefuroxime axetil tabs</i>	2	
<i>cefuroxime sodium inj 1.5gm, 750mg</i>	2	
<i>cephalexin</i>	1	
FETROJA	5	
<i>tazicef inj 1gm, 2gm, 6gm</i>	1	
TEFLARO	5	
Beta-lactam, Penicillins		
<i>amoxicillin/clavulanate potassium</i>	2	
<i>amoxicillin/clavulanate potassium er</i>	2	
<i>amoxicillin chew 125mg, 250mg</i>	1	
<i>amoxicillin caps, susr, tabs</i>	1	
<i>ampicillin sodium inj</i>	1	
<i>ampicillin-sulbactam inj 10gm; 5gm, 1gm; 0.5gm</i>	1	
<i>ampicillin/sulbactam inj 2gm; 1gm</i>	1	
<i>ampicillin caps 500mg</i>	1	
AUGMENTIN SUSR 125MG/5ML; 31.25MG/5ML	4	
BICILLIN C-R INJ 300000UNIT/ML; 300000UNIT/ML, 900000UNIT/2ML; 300000UNIT/2ML	3	
BICILLIN L-A INJ 1200000UNIT/2ML, 2400000UNIT/4ML, 600000UNIT/ML	4	
<i>dicloxacillin sodium</i>	1	
NAFCILLIN	5	
<i>nafcillin sodium inj 10gm, 1gm, 2gm</i>	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>oxacillin sodium inj 1.5gm/50ml; 1gm/50ml, 10gm, 1gm, 2gm, 300mg/50ml; 2gm/50ml</i>	2	
<i>penicillin g potassium in iso-osmotic dextrose</i>	1	
<i>penicillin g potassium inj 20000000unit, 5000000unit</i>	1	
<i>penicillin v potassium</i>	1	
<i>piperacillin sodium/tazobactam sodium</i>	2	
Carbapenems		
<i>ertapenem sodium</i>	4	
<i>imipenem/cilastatin inj 250mg; 250mg</i>	1	
<i>imipenem/cilastatin inj 500mg; 500mg</i>	3	
MEROPENEM/SODIUM CHLORIDE INJ 1GM/50ML; 0.9%	4	
<i>meropenem/sodium chloride inj 500mg; 0.9%</i>	4	
<i>meropenem inj 1gm, 500mg</i>	3	
<i>meropenem inj 2gm</i>	4	
Macrolides		
<i>azithromycin pack, susr, tabs</i>	2	
<i>azithromycin inj 500mg</i>	2	
<i>clarithromycin er</i>	2	
<i>clarithromycin susr, tabs</i>	2	
DIFICID	5	
ERYTHROGIN LACTOBIONATE INJ 500MG	3	
<i>erythrocin stearate tabs 250mg</i>	2	
<i>erythromycin base tabs</i>	4	
<i>erythromycin dr cpep</i>	2	
<i>erythromycin dr tbec 500mg</i>	2	
<i>erythromycin dr tbec 250mg, 333mg</i>	4	
<i>erythromycin ethylsuccinate tabs</i>	4	
<i>erythromycin ethylsuccinate susr 200mg/5ml</i>	2	
<i>erythromycin ethylsuccinate susr 400mg/5ml</i>	5	
<i>erythromycin lactobionate</i>	5	
Quinolones		
BAXDELA TABS	5	
<i>ciprofloxacin hcl tabs 750mg</i>	1	
<i>ciprofloxacin hydrochloride tabs 250mg, 500mg</i>	1	
<i>ciprofloxacin i.v.-in d5w inj 200mg/100ml; 5%</i>	1	
<i>levofloxacin in d5w</i>	2	
LEVOFLOXACIN INJ 25MG/ML	2	
<i>levofloxacin oral soln 25mg/ml</i>	2	
<i>levofloxacin tabs 250mg, 500mg, 750mg</i>	2	
<i>moxifloxacin hydrochloride/sodium hydrochloride</i>	2	
<i>moxifloxacin hydrochloride inj 400mg/250ml</i>	2	
<i>moxifloxacin hydrochloride tabs 400mg</i>	2	
<i>ofloxacin tabs 300mg, 400mg</i>	1	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Sulfonamides		
sodium sulfacetamide	2	
sulfacetamide sodium lotion 10%	2	
sulfadiazine tabs	4	
sulfamethoxazole/trimethoprim	1	
sulfamethoxazole/trimethoprim ds	1	
Tetracyclines		
demeocycline hcl tabs	4	
demeocycline hydrochloride tabs 300mg	4	
doxy 100	2	
doxycycline hyclate caps 100mg, 50mg	2	
doxycycline hyclate inj 100mg	2	
doxycycline hyclate tabs 100mg	2	
doxycycline monohydrate caps 100mg, 50mg	2	
doxycycline monohydrate tabs	2	
doxycycline susr	2	
MINOCIN INJ	5	
minocycline hcl caps 75mg	1	
minocycline hcl tabs 100mg, 75mg	4	
minocycline hydrochloride caps 100mg, 50mg	1	
minocycline hydrochloride tabs 50mg	4	
monodoxine nl caps 100mg	2	
NUZYRA INJ	5	
NUZYRA TABS	5	QL(30 EA per 30 days)
tetracycline hydrochloride caps	2	
VIBRAMYCIN SYRP	4	
XERAVA	5	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT	5	ST NSO
ELEPSIA XR	5	ST NSO
EPIDIOLEX	5	PA NSO
EPRONTIA	4	
felbamate tabs	2	
felbamate susp	4	
FINTEPLA	5	PA NSO
FYCOMPA SUSP	5	
FYCOMPA TABS 2MG	4	
FYCOMPA TABS 10MG, 12MG, 4MG, 6MG, 8MG	5	
lamotrigine er	2	
lamotrigine starter kit/blue	4	
lamotrigine starter kit/green	4	
lamotrigine starter kit/orange	4	
lamotrigine titration	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine chew, tabs</i>	1	
<i>levetiracetam er</i>	1	
<i>levetiracetam/sodium chloride</i>	2	
LEVETIRACETAM TB3D	4	
<i>levetiracetam oral soln, tabs</i>	1	
<i>levetiracetam inj 500mg/5ml</i>	1	
<i>levetiracetam inj 1000mg/100ml, 750mg/100ml, 1500mg/100ml; 540mg/100ml, 500mg/100ml; 820mg/100ml</i>	2	
NAYZILAM	4	
<i>perampanel tabs 2mg</i>	4	
<i>perampanel tabs 10mg, 12mg, 4mg, 6mg, 8mg</i>	5	
<i>roweepra tabs 500mg</i>	1	
SPRITAM	4	ST NSO
<i>subvenite</i>	1	
<i>subvenite starter kit/blue</i>	4	
<i>subvenite starter kit/green</i>	4	
<i>subvenite starter kit/orange</i>	4	
<i>topiramate er cs24</i>	4	
TOPIRAMATE CPSP 50MG	3	
<i>topiramate cpsp 15mg, 25mg</i>	2	
<i>topiramate tabs</i>	2	
<i>valproate sodium inj 100mg/ml</i>	1	
<i>valproic acid</i>	1	
Calcium Channel Modifying Agents		
<i>ethosuximide</i>	2	
METHSUXIMIDE	3	
Gamma-aminobutyric Acid (GABA) Modulating Agents		
<i>clobazam</i>	4	
<i>clonazepam odt</i>	2	
<i>clonazepam tabs</i>	2	
DIACOMIT	5	PA NSO
<i>diazepam rectal gel</i>	4	
<i>divalproex sodium dr</i>	1	
<i>divalproex sodium er</i>	2	
<i> gabapentin caps, soln</i>	1	
<i> gabapentin tabs 600mg, 800mg</i>	1	
LIBERVANT	4	QL(10 EA per 30 days)
<i>phenobarbital sodium inj 130mg/ml, 65mg/ml</i>	2	
<i>phenobarbital elix 20mg/5ml</i>	2	
<i>phenobarbital tabs 100mg, 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg</i>	2	
<i>pregabalin</i>	2	
<i>primidone tabs</i>	1	
SYMPAZAN	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>tiagabine hydrochloride</i>	4	
VALTOCO 10 MG DOSE	5	
VALTOCO 15 MG DOSE	5	
VALTOCO 20 MG DOSE	5	
VALTOCO 5 MG DOSE	5	
<i>vigabatrin</i>	5	
<i>vigadronate</i>	5	
VIGAFYDE	5	PA NSO
<i>vigapoder</i>	5	
ZTALMY	5	PA NSO
Sodium Channel Agents		
APTIOM	5	ST NSO
<i>carbamazepine er</i>	2	
<i>carbamazepine chew 100mg</i>	1	
<i>carbamazepine tabs</i>	1	
<i>carbamazepine susp</i>	2	
DILANTIN INFATABS	4	
DILANTIN CAPS 30MG	4	
<i>epitol</i>	1	
<i>eslicarbazepine acetate</i>	4	
<i>fosphenytoin sodium</i>	1	
<i>lacosamide oral soln, tabs</i>	2	
<i>lacosamide inj</i>	5	
<i>oxcarbazepine tabs</i>	3	
<i>oxcarbazepine susp</i>	4	
<i>phenytek</i>	2	
<i>phenytoin infatabs</i>	1	
<i>phenytoin sodium extended</i>	2	
<i>phenytoin sodium inj</i>	1	
<i>phenytoin chew, susp</i>	1	
<i>rufinamide susp</i>	5	
<i>rufinamide tabs 200mg</i>	4	
<i>rufinamide tabs 400mg</i>	5	
VIMPAT INJ	3	
XCOPRI TABS	5	
XCOPRI TBPK 0	4	
XCOPRI TBPK 0	5	
ZONISADE	4	ST NSO
<i>zonisamide</i>	1	
Antidementia Agents		
Antidementia Agents, Other		
ERGOLOID MESYLATES TABS	2	
<i>memantine/donepezil hydrochloride er</i>	4	QL(30 EA per 30 days)
NAMZARIC C4PK	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
NAMZARIC CP24	4	QL(30 EA per 30 days)
Cholinesterase Inhibitors		
donepezil hcl tbdp	1	
donepezil hcl tabs 10mg	1	
donepezil hydrochloride odt	1	
donepezil hydrochloride tabs 10mg, 5mg	1	
galantamine hydrobromide er	2	
galantamine hydrobromide soln, tabs	2	
rivastigmine tartrate	2	
rivastigmine transdermal system	4	
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
memantine hcl titration pak	1	
memantine hydrochloride er	4	
memantine hydrochloride tabs	1	
memantine hydrochloride soln	4	
Antidepressants		
Antidepressants, Other		
AUVELITY	5	QL(60 EA per 30 days); ST NSO
bupropion hydrochloride er (sr) tb12 100mg, 150mg, 200mg	1	
bupropion hydrochloride er (xl) tb24 150mg, 300mg	2	
bupropion hydrochloride tabs	1	
mirtazapine odt	1	
mirtazapine tabs	1	
olanzapine/fluoxetine	4	
perphenazine/amitriptyline	4	PA NSO
quetiapine fumarate tabs 150mg	1	
SPRAVATO 56MG DOSE	5	PA NSO
SPRAVATO 84MG DOSE	5	PA NSO
ZURZUVAE CAPS 30MG	5	QL(14 EA per 14 days); PA NSO
ZURZUVAE CAPS 20MG, 25MG	5	QL(28 EA per 14 days); PA NSO
Monoamine Oxidase Inhibitors		
EMSAM	5	QL(30 EA per 30 days)
MARPLAN	4	
phenelzine sulfate	2	
tranylcypromine sulfate	4	
SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor		
citalopram hydrobromide soln, tabs	1	
desvenlafaxine er	2	QL(30 EA per 30 days)
DRIZALMA SPRINKLE	4	
duloxetine hydrochloride cpep 20mg, 30mg, 60mg	2	
escitalopram oxalate tabs	1	
escitalopram oxalate soln	4	
FETZIMA	4	ST NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
FETZIMA TITRATION PACK	4	ST NSO
<i>fluoxetine dr</i>	1	
<i>fluoxetine hydrochloride caps, soln</i>	1	
<i>fluoxetine hydrochloride tabs 60mg</i>	4	
<i>fluvoxamine maleate er</i>	4	
<i>fluvoxamine maleate tabs 100mg, 50mg</i>	1	
<i>fluvoxamine maleate tabs 25mg</i>	3	
<i>nefazodone hydrochloride</i>	2	
<i>paroxetine hcl er</i>	2	
<i>paroxetine hcl tabs 30mg, 40mg</i>	1	
<i>paroxetine hydrochloride er tb24 12.5mg, 25mg</i>	2	
<i>paroxetine hydrochloride susp</i>	1	
<i>paroxetine hydrochloride tabs 10mg, 20mg</i>	1	
RALDESY	5	
<i>sertraline hcl conc</i>	1	
<i>sertraline hcl tabs 50mg</i>	1	
<i>sertraline hydrochloride tabs 100mg, 25mg</i>	1	
<i>trazodone hydrochloride tabs 100mg, 150mg, 50mg</i>	1	
<i>trazodone hydrochloride tabs 300mg</i>	2	
TRINTELLIX	4	ST NSO
VENLAFAXINE BESYLATE ER	4	ST NSO
<i>venlafaxine hydrochloride</i>	1	
<i>venlafaxine hydrochloride er cp24</i>	1	
<i>venlafaxine hydrochloride er tb24 150mg, 75mg</i>	1	
<i>vilazodone hydrochloride</i>	2	QL(30 EA per 30 days)
Tricyclics		
<i>amitriptyline hcl tabs 100mg, 150mg, 25mg, 75mg</i>	4	PA NSO
<i>amitriptyline hydrochloride tabs 100mg, 10mg, 50mg</i>	4	PA NSO
<i>amoxapine</i>	2	
<i>clomipramine hydrochloride</i>	4	PA NSO
<i>desipramine hydrochloride</i>	2	
<i>doxepin hcl caps 75mg</i>	4	PA NSO
<i>doxepin hcl conc</i>	4	PA NSO
<i>doxepin hydrochloride caps 100mg, 10mg, 150mg, 25mg, 50mg</i>	4	PA NSO
<i>imipramine hcl tabs 25mg, 50mg</i>	4	PA NSO
<i>imipramine hydrochloride tabs 10mg</i>	4	PA NSO
<i>imipramine pamoate caps 150mg, 75mg</i>	4	PA NSO
<i>nortriptyline hcl caps 25mg, 75mg</i>	2	
<i>nortriptyline hcl soln</i>	2	
<i>nortriptyline hydrochloride caps 10mg, 50mg</i>	2	
<i>protriptyline hcl</i>	4	
<i>trimipramine maleate caps</i>	4	
Antiemetics		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Antiemetics, Other		
<i>compro</i>	2	
<i>dimenhydrinate inj</i>	1	
<i>droperidol inj</i>	1	
<i>meclizine hcl tabs 25mg</i>	2	
<i>meclizine hcl tabs 12.5mg</i>	2	
<i>prochlorperazine edisylate inj 10mg/2ml</i>	2	
<i>prochlorperazine maleate tabs</i>	2	
<i>prochlorperazine supp 25mg</i>	2	
<i>promethazine hcl supp 12.5mg</i>	2	
<i>promethazine hydrochloride tabs</i>	4	PA
<i>promethazine hydrochloride supp 25mg</i>	2	
<i>promethegan supp 12.5mg, 25mg</i>	2	
<i>promethegan supp 50mg</i>	4	
<i>scopolamine</i>	2	
Emetogenic Therapy Adjuncts		
<i>APONVIE</i>	4	PA
<i>aprepitant</i>	4	PA
<i>CINVANTI</i>	4	PA
<i>dronabinol</i>	4	B/D
<i>EMEND INJ, SUSR</i>	4	PA
<i>fosaprepitant dimeglumine</i>	2	PA
<i>gransetron hcl inj 1mg/ml, 4mg/4ml</i>	2	
<i>gransetron hydrochloride tabs</i>	2	B/D
<i>gransetron hydrochloride inj</i>	2	
<i>ondansetron hcl soln</i>	2	B/D
<i>ondansetron hcl tabs 24mg</i>	2	B/D
<i>ondansetron hydrochloride tabs</i>	2	B/D
<i>ONDANSETRON HYDROCHLORIDE INJ 4MG/2ML</i>	2	
<i>ondansetron hydrochloride inj 40mg/20ml, 4mg/2ml</i>	2	
<i>ondansetron odt tbdp 4mg, 8mg</i>	2	B/D
<i>palonosetron hydrochloride</i>	4	
<i>SANCUSO</i>	5	
Antifungals		
Antifungals		
<i>ABELCET</i>	4	PA
<i>amphotericin b liposome</i>	5	PA
<i>amphotericin b inj</i>	4	B/D
<i>caspofungin acetate</i>	4	
<i>clotrimazole crea, soln, troc</i>	2	
<i>CRESEMBA</i>	5	PA
<i>econazole nitrate crea</i>	2	
<i>fluconazole in nacl inj 200mg/100ml; 0.9%</i>	2	
<i>fluconazole in sodium chloride</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>fluconazole susr, tabs</i>	2	
<i>flucytosine caps</i>	5	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize tabs 125mg, 250mg</i>	2	
<i>itraconazole caps</i>	2	
<i>ketonconazole crea, sham, tabs</i>	2	
<i>klayesta</i>	2	
<i>micafungin</i>	4	
<i>miconazole 3 supp</i>	1	
<i>naftifine hydrochloride crea</i>	4	ST
NOXAFIL INJ	5	
<i>nyamyc</i>	2	
<i>nystatin crea, oint, powd, susp, tabs</i>	2	
<i>nystop</i>	2	
ORAVIG	4	
<i>posaconazole dr</i>	5	
<i>posaconazole inj</i>	5	
<i>terbinafine hcl tabs</i>	2	
<i>terconazole</i>	2	
<i>voriconazole tabs</i>	4	
<i>voriconazole susr</i>	5	
<i>voriconazole inj</i>	5	PA
Antigout Agents		
Antigout Agents		
<i>allopurinol tabs 100mg, 300mg</i>	1	
<i>colchicine tabs 0.6mg</i>	2	
<i>febuxostat tabs 80mg</i>	2	
KRYSTEXXA	5	PA
<i>probenecid/colchicine</i>	1	
<i>probenecid tabs</i>	1	
Antimigraine Agents		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists		
AIMOVIG	3	QL(2 ML per 30 days); PA
EMGALITY INJ 120MG/ML	3	QL(2 ML per 28 days); PA
EMGALITY INJ 100MG/ML	3	QL(3 ML per 30 days); PA
NURTEC	4	QL(18 EA per 30 days); PA
Ergot Alkaloids		
<i>dihydroergotamine mesylate soln</i>	5	QL(8 ML per 23 days)
ERGOMAR	4	
ERGOTAMINE TARTRATE/CAFFEINE	3	
MIGERGOT	5	
Prophylactic		
<i>timolol maleate tabs 10mg, 20mg, 5mg</i>	1	
VYEPTI	5	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Serotonin (5-HT) Receptor Agonist		
REYVOW TABS 50MG	4	QL(4 EA per 30 days); PA
REYVOW TABS 100MG	4	QL(8 EA per 30 days); PA
<i>rizatriptan benzoate</i>	2	QL(18 EA per 30 days)
<i>rizatriptan benzoate odt</i>	2	QL(18 EA per 30 days)
SUMATRIPTAN SUCCINATE REFILL	2	QL(4 ML per 30 days)
<i>sumatriptan succinate tabs</i>	2	QL(9 EA per 30 days)
<i>sumatriptan succinate inj 6mg/0.5ml</i>	2	QL(6 ML per 30 days)
<i>sumatriptan succinate inj 4mg/0.5ml, 6mg/0.5ml</i>	4	QL(4 ML per 30 days)
<i>sumatriptan soln 20mg/act</i>	2	QL(12 EA per 30 days)
<i>sumatriptan soln 5mg/act</i>	2	QL(18 EA per 30 days)
<i>zolmitriptan tabs</i>	2	QL(9 EA per 30 days)
Antimyasthenic Agents		
Parasympathomimetics		
<i>pyridostigmine bromide er</i>	4	
<i>pyridostigmine bromide soln</i>	4	
<i>pyridostigmine bromide tabs 60mg</i>	2	
REGONOL INJ 10MG/2ML	3	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone tabs</i>	2	
PRETOMANID	4	QL(30 EA per 30 days); PA
<i>rifabutin</i>	4	
Antituberculars		
CYCLOSERINE	5	
<i>ethambutol hydrochloride</i>	2	
<i>isoniazid inj, tabs</i>	1	
<i>isoniazid syrup</i>	4	
PRIFTIN	4	
<i>pyrazinamide tabs</i>	4	
<i>rifampin caps, inj</i>	2	
SIRTURO	5	PA
TRECATOR	4	
Antineoplastics		
Alkylating Agents		
<i>bendamustine hydrochloride</i>	5	PA NSO
BENDEKA	5	PA NSO
<i>busulfan</i>	5	
BUSULFEX	5	
<i>carboplatin inj 150mg/15ml, 450mg/45ml, 50mg/5ml, 600mg/60ml</i>	1	
CARMUSTINE INJ 300MG, 50MG	5	
<i>carmustine inj 100mg</i>	5	
<i>cisplatin inj 100mg/100ml, 200mg/200ml, 50mg/50ml</i>	1	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
CYCLOPHOSPHAMIDE MONOHYDRATE INJ	5	
CYCLOPHOSPHAMIDE CAPS, TABS	3	B/D
CYCLOPHOSPHAMIDE INJ 2GM/10ML	5	
CYCLOPHOSPHAMIDE INJ 1GM/5ML, 500MG/2.5ML, 500MG/ML	5	
<i>cyclophosphamide inj 500mg</i>	2	
<i>cyclophosphamide inj 1000mg/10ml, 1gm/2ml, 1gm, 2000mg/20ml, 2gm/4ml, 2gm, 500mg/5ml</i>	5	
<i>dacarbazine inj 100mg, 200mg</i>	1	
EVOMELA	5	PA NSO
FRINDOVYX	5	
GLEOSTINE CAPS 10MG, 40MG	4	
GLEOSTINE CAPS 100MG	5	
GRAFAPEX	5	PA NSO
IFOSFAMIDE INJ 1GM/20ML	1	
<i>ifosfamide inj 3gm/60ml</i>	1	
IVRA	5	PA NSO
<i>kemoplat</i>	1	
LEUKERAN	5	
MATULANE	5	PA NSO
<i>melphalan hydrochloride</i>	2	PA NSO
OPDIVO QVANTIG	5	PA NSO
<i>oxaliplatin inj 50mg/10ml</i>	2	
<i>oxaliplatin inj 100mg/20ml, 100mg, 50mg</i>	5	
<i>paraplatin inj 1000mg/100ml</i>	1	
TEMODAR INJ	5	PA NSO
<i>thiotepa inj 100mg, 15mg</i>	5	PA NSO
TREANDA INJ 100MG, 25MG	5	PA NSO
VALCHLOR	5	PA NSO
VIVIMUSTA	5	PA NSO
YONDELIS	5	PA NSO
ZANOSAR	5	
ZEPZELCA	5	PA NSO
Antiandrogens		
<i>abiraterone acetate tabs 250mg</i>	4	PA NSO
<i>abiraterone acetate tabs 500mg</i>	5	PA NSO
<i>abirtega</i>	4	PA NSO
<i>bicalutamide</i>	1	
ERLEADA	5	PA NSO
EULEXIN	4	
<i>nilutamide</i>	5	
NUBEQA	5	PA NSO
XTANDI	5	PA NSO
YONSA	5	PA NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Antiangiogenic Agents		
<i>lenalidomide</i>	5	PA NSO
POMALYST	5	QL(21 EA per 28 days); PA NSO
THALOMID	5	PA NSO
Antiestrogens/Modifiers		
EMCYT	5	
FASLODEX INJ 250MG/5ML	5	
<i>fulvestrant</i>	5	
ORSERDU	5	PA NSO
SOLTAMOX	5	
<i>tamoxifen citrate tabs</i>	1	
<i>toremifene citrate</i>	5	PA NSO
Antimetabolites		
ALIMTA	5	PA NSO
ARRANON	5	
AXTLE	5	PA NSO
<i>cladribine</i>	5	B/D
<i>clofarabine</i>	5	
<i>cytarabine aqueous</i>	1	B/D
<i>cytarabine inj 100mg/ml, 20mg/ml</i>	1	B/D
DROXIA CAPS 200MG	3	
DROXIA CAPS 300MG, 400MG	4	
FLOXURIDINE INJ	5	B/D
<i>fluorouracil inj 1gm/20ml, 2.5gm/50ml, 500mg/10ml, 5gm/100ml</i>	2	B/D
FOLOTYN INJ 40MG/2ML	5	
<i>folotyn inj 20mg/ml</i>	5	
<i>gemcitabine hydrochloride inj 1gm/26.3ml, 200mg/5.26ml, 2gm/52.6ml</i>	2	
<i>gemcitabine hydrochloride inj 1gm/10ml, 200mg/2ml, 2gm/20ml</i>	5	
<i>hydroxyurea caps</i>	1	
<i>mercaptopurine tabs</i>	2	
<i>mercaptopurine susp</i>	5	
<i>nellarabine</i>	5	
<i>pemetrexed disodium</i>	5	PA NSO
PEMETREXED INJ 1GM/40ML	4	PA NSO
PEMETREXED INJ 100MG, 500MG	5	PA NSO
PEMETREXED INJ 100MG/4ML, 100MG, 1GM/40ML, 500MG/20ML, 500MG, 850MG/34ML	5	PA NSO
<i>pemetrexed inj 1000mg, 100mg, 500mg, 750mg</i>	5	PA NSO
PEMFEXY	5	PA NSO
PEMRYDI RTU	5	PA NSO
PRALATREXATE	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
PURIXAN	5	
TABLOID	5	PA NSO
VYXEOS	5	PA NSO
Antineoplastics, Other		
ABRAXANE	5	
<i>adriamycin inj 50mg</i>	1	B/D
ADSTILADRIN	5	PA NSO
AKEEGA	5	PA NSO
ANKTIVA	5	PA NSO
<i>arsenic trioxide</i>	5	
<i>azacitidine</i>	5	
<i>bleomycin sulfate</i>	1	B/D
BORTEZOMIB INJ 1MG, 2.5MG, 3.5MG/1.4ML	4	PA NSO
BORTEZOMIB INJ 3.5MG	5	PA NSO
<i>bortezomib inj 3.5mg</i>	5	PA NSO
COLUMVI	5	PA NSO
<i>dactinomycin</i>	5	PA NSO
<i>daunorubicin hydrochloride</i>	1	
<i>decitabine</i>	5	
DOCETAXEL INJ 80MG/8ML	5	
<i>docetaxel inj 160mg/16ml, 20mg/ml, 80mg/4ml</i>	2	
<i>docetaxel inj 160mg/8ml, 20mg/2ml</i>	5	
<i>doxorubicin hcl inj 2mg/ml, 50mg</i>	1	B/D
<i>doxorubicin hydrochloride liposomal</i>	5	
<i>doxorubicin hydrochloride inj 10mg</i>	1	B/D
ELREXFIO	5	PA NSO
ELZONRIS	5	PA NSO
EPKINLY	5	PA NSO
<i>eribulin mesylate</i>	5	
HALAVEN	5	
IBRANCE TABS 100MG, 125MG, 75MG	5	PA NSO
<i>idarubicin hcl</i>	5	
<i>idarubicin hydrochloride</i>	5	
IMDELLTRA	5	PA NSO
INREBIC	5	PA NSO
ISTODAX	5	
ITOVEBI	5	PA NSO
IWLIFIN	5	PA NSO
IXEMPRA KIT	5	
JEVTANA	5	
KIMMTRAK	5	PA NSO
KISQALI FEMARA 200 DOSE	5	PA NSO
KISQALI FEMARA 400 DOSE	5	PA NSO
KISQALI FEMARA 600 DOSE	5	PA NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
LAZCLUZE TABS 240MG	5	PA NSO
LAZCLUZE TABS 80MG	5	QL(60 EA per 30 days); PA NSO
<i>leucovorin calcium inj 100mg/10ml, 100mg, 200mg, 350mg, 500mg, 50mg</i>	1	
<i>leucovorin calcium tabs 5mg</i>	1	
<i>leucovorin calcium tabs 10mg, 15mg, 25mg</i>	4	
<i>levoleucovorin inj 50mg</i>	5	
LONSURF	5	PA NSO
LYSODREN	5	
<i>mitomycin inj 20mg, 40mg, 5mg</i>	5	
<i>mutamycin</i>	5	
OGSIVEO	5	PA NSO
OJEMDA	5	PA NSO
ONCASPAR	5	
ONUREG	5	
<i>paclitaxel</i>	1	
<i>paclitaxel protein-bound particles</i>	5	
PEMETREXED INJ 100MG/4ML	5	PA NSO
PHESGO	5	PA NSO
PROLEUKIN	5	
REVUFORJ	5	PA NSO
ROMIDEPSIN INJ 27.5MG/5.5ML	5	
<i>romidepsin inj 10mg</i>	5	
RYLAZE	5	
TALVEY	5	PA NSO
TECVAYLI	5	PA NSO
TICE BCG	4	
TRISENOX INJ 12MG/6ML	5	
<i>valrubicin</i>	5	
VALSTAR	5	
VELCADE	5	PA NSO
<i>vinblastine sulfate inj 1mg/ml</i>	1	B/D
<i>vincristine sulfate inj 1mg/ml</i>	1	B/D
<i>vinorelbine tartrate</i>	1	
VONJO	5	PA NSO
ZALTRAP	5	
ZOLINZA	5	PA NSO
Antineoplastics		
OPDUALAG	5	PA NSO
Aromatase Inhibitors, 3rd Generation		
<i>anastrozole tabs</i>	1	
<i>exemestane</i>	2	
<i>letrozole</i>	2	
Enzyme Inhibitors		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
AVMAPKI FAKZYNJA CO-PACK	5	PA NSO
ETOPOPHOS	5	
<i>etoposide inj 100mg/5ml, 1gm/50ml, 500mg/25ml</i>	1	
<i>irinotecan hydrochloride inj 100mg/5ml, 40mg/2ml</i>	1	
KYPROLIS	5	
<i>topotecan hcl inj 4mg/4ml</i>	2	
<i>topotecan hydrochloride</i>	2	
Molecular Target Inhibitors		
ALECENSA	5	PA NSO
ALIQOPA	5	PA NSO
ALUNBRIG	5	PA NSO
AUGTYRO CAPS 160MG	5	PA NSO
AUGTYRO CAPS 40MG	5	PA NSO
AYVAKIT	5	PA NSO
BALVERSA	5	PA NSO
BELEODAQ	5	PA NSO
BOSULIF	5	PA NSO
BRAFTOVI CAPS 75MG	5	PA NSO
BRUKINSA	5	PA NSO
CABOMETYX	5	QL(30 EA per 30 days); PA NSO
CALQUENCE	5	PA NSO
CAPRELSA	5	PA NSO
COMETRIQ	5	PA NSO
COPIKTRA	5	PA NSO
COTELLIC	5	PA NSO
DANZITEN	5	PA NSO
<i>dasatinib</i>	5	PA NSO
DAURISMO	5	PA NSO
ENSACOVE	5	PA NSO
ERIVEDGE	5	PA NSO
<i>erlotinib hydrochloride tabs 100mg</i>	4	PA NSO
<i>erlotinib hydrochloride tabs 150mg, 25mg</i>	5	PA NSO
<i>everolimus tabs 10mg, 2.5mg, 5mg, 7.5mg</i>	5	PA NSO
<i>everolimus tabs 2mg, 3mg, 5mg</i>	5	PA NSO
EXKIVITY	5	PA NSO
FLUDARABINE PHOSPHATE INJ 50MG	5	
<i>fludarabine phosphate inj 50mg/2ml</i>	1	
FOTIVDA	5	PA NSO
FRUZAQLA	5	PA NSO
FYARRO	5	PA NSO
GAVRETO	5	PA NSO
<i>gefitinib</i>	5	PA NSO
GILOTrif	5	PA NSO
GOMEKLI	5	PA NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
IBRANCE CAPS 100MG, 125MG, 75MG	5	PA NSO
ICLUSIG	5	PA NSO
IDHIFA	5	PA NSO
<i>imatinib mesylate tabs 100mg</i>	3	PA NSO
<i>imatinib mesylate tabs 400mg</i>	4	PA NSO
IMBRUVICA CAPS, SUSP	5	PA NSO
IMBRUVICA TABS 420MG	5	PA NSO
IMKELDI	5	PA NSO
INLYTA	5	PA NSO
INQOVI	5	PA NSO
JAKAFI	5	QL(60 EA per 30 days); PA NSO
JAYPIRCA TABS 100MG	5	PA NSO
JAYPIRCA TABS 50MG	5	QL(30 EA per 30 days); PA NSO
KISQALI	5	PA NSO
KOSELUGO	5	PA NSO
KRAZATI	5	PA NSO
<i>lapatinib ditosylate</i>	5	PA NSO
LENVIMA 10 MG DAILY DOSE	5	PA NSO
LENVIMA 12MG DAILY DOSE	5	PA NSO
LENVIMA 14 MG DAILY DOSE	5	PA NSO
LENVIMA 18 MG DAILY DOSE	5	PA NSO
LENVIMA 20 MG DAILY DOSE	5	PA NSO
LENVIMA 24 MG DAILY DOSE	5	PA NSO
LENVIMA 4 MG DAILY DOSE	5	PA NSO
LENVIMA 8 MG DAILY DOSE	5	PA NSO
LORBRENA	5	PA NSO
LUMAKRAS TABS 240MG	5	PA NSO
LUMAKRAS TABS 120MG, 320MG	5	PA NSO
LYNPARZA TABS	5	PA NSO
LYTGOBI	5	PA NSO
MEKINIST	5	PA NSO
MEKTOVI	5	PA NSO
NERLYNX	5	PA NSO
<i>nilotinib</i>	5	PA NSO
NINLARO	5	PA NSO
ODOMZO	5	PA NSO
OJJAARA	5	PA NSO
<i>pazopanib hydrochloride</i>	5	PA NSO
PEMAZYRE	5	PA NSO
PIQRAY 200MG DAILY DOSE	5	PA NSO
PIQRAY 250MG DAILY DOSE	5	PA NSO
PIQRAY 300MG DAILY DOSE	5	PA NSO
QINLOCK	5	PA NSO
RETEVMO TABS	5	PA NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
RETEVMO CAPS	5	PA NSO
REZLIDHIA	5	PA NSO
ROMVIMZA	5	PA NSO
ROZLYTREK	5	PA NSO
RUBRACA	5	PA NSO
RYDAPT	5	PA NSO
SCEMBLIX TABS 100MG	5	PA NSO
SCEMBLIX TABS 20MG, 40MG	5	PA NSO
<i>sorafenib</i>	5	PA NSO
<i>sorafenib tosylate</i>	5	PA NSO
SPRYCEL	5	PA NSO
STIVARGA	5	PA NSO
<i>sunitinib malate</i>	5	PA NSO
TABRECTA	5	PA NSO
TAFINLAR	5	PA NSO
TAGRISSO	5	PA NSO
TALZENNA	5	PA NSO
TASIGNA	5	PA NSO
TAZVERIK	5	PA NSO
<i>temsirolimus</i>	5	
TEPMETKO	5	PA NSO
TIBSOVO	5	PA NSO
TORISEL	5	
<i>torpenz</i>	5	PA NSO
TRUQAP	5	PA NSO
TUKYSA	5	PA NSO
TURALIO CAPS 125MG	5	PA NSO
VANFLYTA	5	PA NSO
VENCLEXTA STARTING PACK	5	PA NSO
VENCLEXTA TABS 10MG	3	PA NSO
VENCLEXTA TABS 100MG, 50MG	5	PA NSO
VERZENIO	5	PA NSO
VITRAKVI	5	PA NSO
VIZIMPRO	5	PA NSO
XALKORI	5	PA NSO
XOSPATA	5	PA NSO
XPOVIO 60 MG TWICE WEEKLY	5	PA NSO
XPOVIO 80 MG TWICE WEEKLY	5	PA NSO
XPOVIO TBPK 10MG	5	PA NSO
XPOVIO TBPK 40MG, 50MG, 60MG	5	PA NSO
ZEJULA CAPS	5	PA NSO
ZEJULA TABS 200MG, 300MG	5	PA NSO
ZEJULA TABS 100MG	5	QL(30 EA per 30 days); PA NSO
ZELBORAFA	5	PA NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
ZYDELIG	5	PA NSO
ZYKADIA TABS	5	PA NSO
<i>Monoclonal Antibodies/Antibody-Drug Conjugates</i>		
ADCETRIS	5	
ALYMSYS	5	PA NSO
ARZERRA	5	
AVASTIN	5	
BAVENCIO	5	PA NSO
BESPONSA	5	PA NSO
BIZENGRI	5	PA NSO
BLINCYTO	5	PA NSO
CYRAMZA	5	PA NSO
DANYELZA	5	PA NSO
DARZALEX	5	PA NSO
DARZALEX FASPRO	5	PA NSO
DATROWAY	5	PA NSO
ELAHERE	5	PA NSO
EMPLICITI	5	PA NSO
EMRELIS	5	PA NSO
ENHERTU	5	PA NSO
ERBITUX	5	PA NSO
GAZYVA	5	PA NSO
HERCEPTIN HYLECTA	5	PA NSO
HERCEPTIN INJ 150MG	5	PA NSO
HERZUMA	5	PA NSO
IMFINZI	5	PA NSO
IMJUDO	5	PA NSO
JEMPERLI	5	PA NSO
KADCYLA	5	
KANJINTI	5	PA NSO
KEYTRUDA INJ 100MG/4ML	5	PA NSO
LIBTAYO	5	PA NSO
LOQTORZI	5	PA NSO
LUNSUMIO	5	PA NSO
MARGENZA	5	PA NSO
MONJUVI	5	PA NSO
MVASI	5	PA NSO
MYLOTARG	5	PA NSO
OGIVRI	5	PA NSO
ONTRUZANT	5	PA NSO
OPDIVO	5	PA NSO
PADCEV	5	PA NSO
PERJETA	5	PA NSO
POLIVY	5	PA NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
PORTRAZZA	5	PA NSO
RIABNI	5	PA NSO
RITUXAN	5	PA NSO
RITUXAN HYCELA	5	PA NSO
RUXIENCE	5	PA NSO
RYBREVANT	5	PA NSO
SARCLISA	5	PA NSO
TECENTRIQ	5	PA NSO
TECENTRIQ HYBREZA	5	PA NSO
TEVIMBRA	5	PA NSO
TIVDAK	5	PA NSO
TRAZIMERA	5	PA NSO
TRODELVY	5	PA NSO
TRUXIMA	5	PA NSO
VECTIBIX INJ 100MG/5ML, 400MG/20ML	5	PA NSO
VEGZELMA	5	PA NSO
VYLOY INJ 300MG	5	PA NSO
YERVOY	5	PA NSO
ZIIHERA	5	PA NSO
ZYNLONTA	5	PA NSO
ZYNYZ	5	PA NSO
Retinoids		
<i>bexarotene</i>	5	PA NSO
PANRETIN	5	
<i>tretinooin caps 10mg</i>	5	PA NSO
Treatment Adjuncts		
<i>dexrazoxane</i>	5	
<i>dexrazoxane hydrochloride</i>	5	
ELITEK	5	PA
<i>mesna inj</i>	1	
<i>mesna tabs</i>	5	
MESNEX TABS	5	
VORANIGO TABS 40MG	5	PA NSO
VORANIGO TABS 10MG	5	QL(60 EA per 30 days); PA NSO
Antiparasitics		
Anthelmintics		
<i>albendazole tabs</i>	5	
IVERMECTIN TABS 6MG	2	PA
<i>ivermectin tabs 3mg</i>	2	PA
<i>praziquantel tabs</i>	4	
Antiprotozoals		
<i>atovaquone</i>	4	
<i>atovaquone/proguanil hcl tabs 62.5mg; 25mg</i>	2	
<i>atovaquone/proguanil hydrochloride</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>chloroquine phosphate tabs</i>	1	
COARTEM	4	
<i>hydroxychloroquine sulfate tabs</i>	1	
<i>mefloquine hydrochloride</i>	1	
<i>nitazoxanide</i>	5	
<i>pentamidine isethionate inhalation soln</i>	2	B/D
<i>pentamidine isethionate inj</i>	2	
PRIMAQUINE PHOSPHATE TABS	3	
<i>pyrimethamine tabs</i>	5	
<i>quinine sulfate caps 324mg</i>	2	PA
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate tabs</i>	1	
<i>trihexyphenidyl hydrochloride</i>	2	
Antiparkinson Agents, Other		
<i>carbidopa/levodopa/entacapone</i>	4	
<i>entacapone</i>	2	
ONGENTYS	4	ST
<i>tolcapone</i>	5	
Dopamine Agonists		
<i>apomorphine hydrochloride inj</i>	5	PA
<i>bromocriptine mesylate caps, tabs</i>	2	
<i>pramipexole dihydrochloride</i>	1	
<i>ropinirole er</i>	2	
<i>ropinirole hcl tabs 0.5mg, 1mg, 2mg, 4mg, 5mg</i>	1	
<i>ropinirole hydrochloride tabs 0.25mg, 3mg</i>	1	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa/levodopa</i>	1	
<i>carbidopa/levodopa er</i>	2	
<i>carbidopa/levodopa odt</i>	1	
<i>carbidopa tabs</i>	4	
RYTARY	4	
Monoamine Oxidase B (MAO-B) Inhibitors		
<i>rasagiline mesylate tabs</i>	2	
<i>selegiline hcl caps, tabs</i>	2	
Antipsychotics		
1st Generation/Typical		
<i>chlorpromazine hcl inj</i>	2	
<i>chlorpromazine hydrochloride conc, tabs</i>	2	
<i>fluphenazine decanoate inj</i>	2	
<i>fluphenazine hcl conc</i>	2	
<i>fluphenazine hydrochloride</i>	2	
<i>haloperidol decanoate inj</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>haloperidol lactate</i>	2	
<i>haloperidol conc, tabs</i>	2	
<i>loxapine</i>	1	
MOLINDONE HYDROCHLORIDE	3	
<i>perphenazine tabs</i>	2	
<i>pimozide</i>	2	
<i>thioridazine hydrochloride</i>	2	
<i>thiothixene caps 10mg, 1mg, 2mg, 5mg</i>	4	
<i>trifluoperazine hcl tabs 10mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hydrochloride tabs 1mg</i>	1	
2nd Generation/Atypical		
ABILIFY MAINTENA	5	ST NSO
ABILIFY MYCITE MAINTENANCE KIT	5	QL(30 EA per 30 days); ST NSO
ABILIFY MYCITE STARTER KIT	5	QL(30 EA per 30 days); ST NSO
<i>aripiprazole</i>	2	
<i>aripiprazole odt tbdp 15mg</i>	4	
<i>aripiprazole odt tbdp 10mg</i>	5	
ARISTADA	5	ST NSO
ARISTADA INITIO	5	ST NSO
ASENAPINE MALEATE SL	4	
CAPLYTA	5	QL(30 EA per 30 days); ST NSO
FANAPT	5	ST NSO
FANAPT TITRATION PACK	4	ST NSO
INVEGA HAFYERA	5	ST NSO
INVEGA SUSTENNA INJ 39MG/0.25ML	4	ST NSO
INVEGA SUSTENNA INJ 117MG/0.75ML, 156MG/ML, 234MG/1.5ML, 78MG/0.5ML	5	ST NSO
INVEGA TRINZA	5	ST NSO
<i>lurasidone hydrochloride</i>	2	
LYBALVI	5	QL(30 EA per 30 days); ST NSO
NUPLAZID CAPS	5	QL(30 EA per 30 days); PA NSO
NUPLAZID TABS 10MG	5	QL(90 EA per 30 days); PA NSO
<i>olanzapine odt</i>	2	
OLANZAPINE INJ	3	
<i>olanzapine tabs</i>	2	
OPIPZA FILM 2MG	5	QL(30 EA per 30 days); PA NSO
OPIPZA FILM 10MG, 5MG	5	QL(90 EA per 30 days); PA NSO
<i>paliperidone er</i>	4	ST NSO
PERSERIS	5	ST NSO
<i>quetiapine fumarate er</i>	2	
<i>quetiapine fumarate tabs 100mg, 200mg, 25mg, 300mg, 400mg, 50mg</i>	1	
REXULTI	5	ST NSO
RISPERDAL CONSTA INJ 12.5MG, 25MG	4	ST NSO

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
RISPERDAL CONSTA INJ 37.5MG, 50MG	5	ST NSO
<i>risperidone</i>	2	
<i>risperidone er inj 12.5mg</i>	2	
<i>risperidone er inj 25mg</i>	4	
<i>risperidone er inj 37.5mg, 50mg</i>	5	
<i>risperidone odt</i>	2	
SECUADO	5	ST NSO
VRAYLAR CPPK	4	QL(14 EA per 365 days); ST NSO
VRAYLAR CAPS	5	QL(30 EA per 30 days); ST NSO
<i>ziprasidone hcl</i>	2	
<i>ziprasidone mesylate</i>	2	ST NSO
ZYPREXA RELPREVV INJ 210MG	4	ST NSO
ZYPREXA RELPREVV INJ 300MG, 405MG	5	ST NSO
Treatment-Resistant		
<i>clozapine odt</i>	4	
<i>clozapine tabs 100mg, 200mg, 25mg, 50mg</i>	2	
VERSACLOZ	5	
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen inj 500mcg/ml</i>	4	B/D
<i>baclofen inj 20000mcg/20ml, 40mg/20ml, 50mcg/ml</i>	5	B/D
<i>baclofen tabs 10mg, 20mg, 5mg</i>	2	
BOTOX	4	PA
<i>dantrolene sodium caps 100mg, 25mg</i>	1	
DYSPORT	4	PA
GABLOFEN INJ 10000MCG/20ML, 20000MCG/20ML, 40000MCG/20ML	4	B/D
GABLOFEN INJ 50MCG/ML	5	B/D
LIORESAL INTRATHECAL INJ 0.05MG/ML	3	B/D
LIORESAL INTRATHECAL INJ 10MG/20ML	4	B/D
LIORESAL INTRATHECAL INJ 10MG/5ML	5	B/D
MYOBLOC	5	PA
<i>tizanidine hcl tabs 2mg</i>	1	
<i>tizanidine hydrochloride tabs</i>	1	
<i>tizanidine hydrochloride caps</i>	2	
XEOMIN INJ 100UNIT, 50UNIT	4	PA
XEOMIN INJ 200UNIT	5	PA
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
<i>cidofovir</i>	5	
<i>ganciclovir inj 500mg/10ml, 500mg</i>	1	B/D
LIVTENCITY	5	
PREVYMIS INJ, TABS	5	
PREVYMIS PACK 20MG	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
PREVYMIS PACK 120MG	5	
<i>valganciclovir</i>	2	
<i>valganciclovir hydrochloride</i>	5	
Anti-hepatitis B (HBV) Agents		
<i>adefovir dipivoxil</i>	4	
BARACLUDE SOLN	4	
<i>entecavir</i>	4	
<i>lamivudine tabs 100mg</i>	2	
VEMOLIDY	5	
Anti-hepatitis C (HCV) Agents		
EPCLUSA	5	PA
HARVONI	5	PA
LEDIPASVIR/SOFOSBUVIR	5	PA
MAVYRET	5	PA
<i>ribavirin tabs 200mg</i>	2	
SOFOSBUVIR/VELPATASVIR	5	PA
SOVALDI	5	PA
ZEPATIER	5	PA
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY	5	
CABENUVA	5	
DOVATO	5	
GENVOYA	5	
ISENTRESS HD	5	
ISENTRESS PACK, TABS	5	
ISENTRESS CHEW 25MG	4	
ISENTRESS CHEW 100MG	5	
JULUCA	5	
STRIBILD	5	
TIVICAY PD	5	
TIVICAY TABS 10MG	4	
TIVICAY TABS 25MG, 50MG	5	
VOCABRIA	5	
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA	5	
DELSTRIGO	5	
EDURANT	5	
EDURANT PED	5	
<i>efavirenz</i>	4	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	4	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	5	
<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate</i>	5	
<i>etravirine</i>	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
INTELENCE TABS 25MG	4	
<i>nevirapine</i>	2	
<i>nevirapine er tb24 400mg</i>	2	
PIFELTRO	5	
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
<i>abacavir sulfate</i>	2	
<i>abacavir sulfate/lamivudine</i>	4	
<i>abacavir tabs</i>	2	
<i>abacavir soln</i>	4	
CIMDUO	5	
DESCOVY	5	
<i>emtricitabine</i>	4	
<i>emtricitabine/tenofovir disoproxil</i>	5	
<i>emtricitabine/tenofovir disoproxil fumarate tabs 200mg; 300mg</i>	4	
<i>emtricitabine/tenofovir disoproxil fumarate tabs 100mg; 150mg, 133mg; 200mg</i>	5	
EMTRIVA SOLN	4	
<i>lamivudine/zidovudine</i>	4	
<i>lamivudine soln 10mg/ml</i>	2	
<i>lamivudine tabs 150mg, 300mg</i>	2	
ODEFSEY	5	
RETROVIR IV INFUSION	4	
<i>tenofovir disoproxil fumarate</i>	4	
TRIUMEQ	5	
TRIUMEQ PD	4	
TRIZIVIR	5	QL(60 EA per 30 days)
VIREAD POWD	5	
VIREAD TABS 150MG, 200MG, 250MG	5	
<i>zidovudine</i>	1	
Anti-HIV Agents, Other		
FUZEON	5	
<i>maraviroc</i>	5	
RUKOBIA	5	
SELZENTRY SOLN	5	
SELZENTRY TABS 25MG	4	
SELZENTRY TABS 75MG	5	
SUNLENCA TABS	5	
SUNLENCA INJ, TBPK	5	
TROGARZO	5	
TYBOST	3	
Anti-HIV Agents, Protease Inhibitors (PI)		
APTIVUS CAPS	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>atazanavir</i>	4	
<i>atazanavir sulfate</i>	4	
<i>darunavir</i>	5	
EVOTAZ	5	
<i>fosamprenavir calcium</i>	5	
LEXIVA SUSP	4	
<i>lopinavir/ritonavir</i>	4	
NORVIR PACK	3	
PREZCOBIX	5	
PREZISTA SUSP	5	
PREZISTA TABS 75MG	4	
PREZISTA TABS 150MG	5	
REYATAZ PACK	5	
<i>ritonavir</i>	2	
SYMTUZA	5	
VIRACEPT	5	
Anti-influenza Agents		
<i>amantadine hcl caps, soln, tabs</i>	2	
<i>oseltamivir phosphate caps 75mg</i>	2	QL(110 EA per 365 days)
<i>oseltamivir phosphate caps 30mg</i>	2	QL(168 EA per 365 days)
<i>oseltamivir phosphate caps 45mg</i>	2	QL(84 EA per 365 days)
<i>oseltamivir phosphate susr</i>	2	QL(1080 ML per 365 days)
RELENZA DISKHALER	3	
<i>rimantadine hydrochloride</i>	1	
XOFLUZA TBPK 40MG, 80MG	4	
Antiherpetic Agents		
<i>acyclovir sodium inj 50mg/ml</i>	2	B/D
<i>acyclovir caps 200mg</i>	2	
<i>acyclovir susp 200mg/5ml</i>	2	
<i>acyclovir tabs 400mg, 800mg</i>	2	
<i>famciclovir tabs</i>	2	
<i>valacyclovir hydrochloride</i>	2	
Antiviral, Coronavirus Agents		
LAGEVRIO	4	QL(40 EA per 5 days)
PAXLOVID TBPK 150MG; 100MG	3	QL(11 EA per 5 days)
PAXLOVID TBPK 150MG; 100MG	3	QL(20 EA per 5 days)
PAXLOVID TBPK 150MG; 100MG	3	QL(30 EA per 5 days)
VEKLURY INJ 100MG	5	
Anxiolytics		
Anxiolytics, Other		
<i>buspirone hcl tabs 15mg</i>	2	
<i>buspirone hydrochloride tabs 10mg, 30mg, 5mg, 7.5mg</i>	2	
<i>meprobamate</i>	4	
Benzodiazepines		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam er tb24 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam er tb24 2mg, 3mg</i>	2	QL(90 EA per 30 days)
<i>alprazolam odt tbdp 2mg</i>	2	
<i>alprazolam odt tbdp 0.25mg, 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam xr tb24 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam xr tb24 2mg, 3mg</i>	2	QL(90 EA per 30 days)
<i>alprazolam tabs 0.25mg, 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam tabs 2mg</i>	2	QL(150 EA per 30 days)
<i>chlordiazepoxide hcl caps 10mg, 5mg</i>	2	QL(120 EA per 30 days)
<i>chlordiazepoxide hydrochloride caps 25mg</i>	2	QL(120 EA per 30 days)
<i>clorazepate dipotassium tabs 15mg</i>	2	QL(180 EA per 30 days)
<i>clorazepate dipotassium tabs 7.5mg</i>	2	QL(360 EA per 30 days)
<i>clorazepate dipotassium tabs 3.75mg</i>	2	QL(720 EA per 30 days)
<i>diazepam intensol</i>	2	
<i>diazepam oral soln</i>	2	
<i>diazepam tabs</i>	2	QL(120 EA per 30 days)
<i>diazepam inj 5mg/ml</i>	2	
<i>lorazepam inj 2mg/ml, 4mg/ml</i>	2	
<i>lorazepam tabs 0.5mg</i>	2	QL(120 EA per 30 days)
<i>lorazepam tabs 2mg</i>	2	QL(150 EA per 30 days)
<i>lorazepam tabs 1mg</i>	2	QL(90 EA per 30 days)
<i>midazolam hcl syrp</i>	2	
<i>midazolam hcl inj 10mg/10ml, 10mg/2ml, 50mg/10ml, 5mg/5ml, 5mg/ml</i>	2	
<i>midazolam hydrochloride inj 10mg/10ml, 10mg/2ml, 25mg/5ml, 2mg/2ml, 50mg/10ml, 5mg/5ml, 5mg/ml</i>	2	
<i>oxazepam</i>	2	QL(120 EA per 30 days)
Bipolar Agents		
Mood Stabilizers		
<i>lithium</i>	1	
<i>lithium carbonate er</i>	1	
<i>lithium carbonate caps, tabs</i>	1	
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose tabs</i>	1	
<i>ALOGLIPTIN</i>	4	QL(30 EA per 30 days); ST
<i>ALOGLIPTIN/METFORMIN HCL</i>	4	QL(60 EA per 30 days); ST
<i>ALOGLIPTIN/METFORMIN HYDROCHLORIDE</i>	4	QL(60 EA per 30 days); ST
<i>ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG</i>	4	QL(30 EA per 30 days); ST
<i>glimepiride tabs 1mg, 2mg, 4mg</i>	1	
<i>glipizide er</i>	1	
<i>glipizide xl</i>	1	
<i>glipizide/metformin hydrochloride</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
GLIPIZIDE TABS 2.5MG	1	
<i>glipizide tabs 10mg, 5mg</i>	1	
GLYXAMBI	3	
JANUMET	3	ST
JANUMET XR	3	ST
JANUVIA	3	ST
JENTADUETO	3	QL(60 EA per 30 days); ST
JENTADUETO XR TB24 5MG; 1000MG	3	QL(30 EA per 30 days); ST
JENTADUETO XR TB24 2.5MG; 1000MG	3	QL(60 EA per 30 days); ST
<i>metformin hydrochloride er tb24 500mg, 750mg</i>	1	
<i>metformin hydrochloride soln</i>	1	
<i>metformin hydrochloride tabs 1000mg, 500mg, 850mg</i>	1	
<i>miglitol</i>	2	
MOUNJARO	3	PA
<i>nateglinide</i>	2	
NESINA	4	QL(30 EA per 30 days); ST
OSENI TABS 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG	4	QL(30 EA per 30 days); ST
OZEMPIC INJ 2MG/3ML, 4MG/3ML, 8MG/3ML	3	PA
<i>pioglitazone hcl-glimepiride</i>	2	
<i>pioglitazone hcl/metformin hcl</i>	2	
<i>pioglitazone hcl tabs 45mg</i>	2	
<i>pioglitazone hydrochloride tabs 15mg, 30mg</i>	2	
<i>repaglinide</i>	2	
RYBELSUS TABS 1.5MG, 4MG, 9MG	3	PA
RYBELSUS TABS 14MG, 3MG, 7MG	3	PA
SYMLINPEN 120	5	PA
SYMLINPEN 60	5	PA
SYNJARDY	3	
SYNJARDY XR	3	
TRADJENTA	3	QL(30 EA per 30 days); ST
TRIJARDY XR	3	
TRULICITY	3	PA
XIGDUO XR	3	
XULTOPHY 100/3.6	4	ST
Glycemic Agents		
<i>diazoxide susp</i>	5	
GLUCAGEN HYPOKIT	3	
GLUCAGON EMERGENCY KIT	3	
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	3	
GVOKE HYPOOPEN 1-PACK	4	
GVOKE HYPOOPEN 2-PACK	4	
GVOKE KIT	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
GVOKE PFS INJ 1MG/0.2ML	4	
Insulins		
HUMALOG	3	QL(60 ML per 30 days)
HUMALOG JUNIOR KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG MIX 50/50	3	QL(60 ML per 30 days)
HUMALOG MIX 50/50 KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG MIX 75/25	3	QL(60 ML per 30 days)
HUMALOG MIX 75/25 KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin 70/30</i>	2	QL(60 ML per 30 days)
HUMULIN 70/30 KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin n</i>	2	QL(60 ML per 30 days)
HUMULIN N KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin r</i>	2	QL(60 ML per 30 days)
HUMULIN R U-500 (CONCENTRATED)	3	QL(60 ML per 30 days)
HUMULIN R U-500 KWIKPEN	3	QL(60 ML per 30 days)
LANTUS	3	QL(60 ML per 30 days)
LANTUS SOLOSTAR	3	QL(60 ML per 30 days)
NOVOLOG	4	QL(60 ML per 30 days); ST
NOVOLOG FLEXPEN	4	QL(60 ML per 30 days); ST
NOVOLOG FLEXPEN RELION	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 RELION	4	QL(60 ML per 30 days); ST
NOVOLOG PENFILL	4	QL(60 ML per 30 days); ST
NOVOLOG RELION	4	QL(60 ML per 30 days); ST
TOUJEO MAX SOLOSTAR	3	QL(27 ML per 30 days)
TOUJEO SOLOSTAR	3	QL(27 ML per 30 days)
TRESIBA	3	QL(54 ML per 30 days)
TRESIBA FLEXTOUCH	3	QL(54 ML per 30 days)
Blood Products and Modifiers		
Anticoagulants		
<i>dabigatran etexilate caps 110mg</i>	2	
<i>dabigatran etexilate caps 150mg, 75mg</i>	4	
ELIQUIS STARTER PACK	3	QL(148 EA per 365 days)
ELIQUIS TABS 2.5MG	3	QL(60 EA per 30 days)
ELIQUIS TABS 5MG	3	QL(90 EA per 30 days)
<i>enoxaparin sodium</i>	4	
<i>fondaparinux sodium inj 2.5mg/0.5ml</i>	4	
<i>fondaparinux sodium inj 10mg/0.8ml, 5mg/0.4ml, 7.5mg/0.6ml</i>	5	
FRAGMIN INJ 10000UNIT/4ML, 2500UNIT/0.2ML	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
FRAGMIN INJ 10000UNIT/ML, 12500UNIT/0.5ML, 15000UNIT/0.6ML, 18000UNT/0.72ML, 5000UNIT/0.2ML, 7500UNIT/0.3ML, 95000UNIT/3.8ML	5	
<i>heparin sodium/d5w inj 5%; 100unit/ml, 5%; 25000unit/500ml, 5%; 40unit/ml</i>	2	
<i>heparin sodium/dextrose inj 5%; 25000unit/250ml, 5%; 25000unit/500ml</i>	2	
<i>heparin sodium/nacl 0.45% inj 25000unit/250ml; 0.45%</i>	2	
<i>heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%</i>	2	
<i>heparin sodium/sodium chloride 0.9% inj 1000unit/500ml; 0.9%</i>	2	
<i>heparin sodium/sodium chloride inj 25000unit/250ml; 0.45%, 25000unit/500ml; 0.45%</i>	2	
<i>heparin sodium inj 10000unit/ml, 1000unit/ml, 20000unit/ml, 5000unit/ml</i>	2	
<i>jantoven</i>	1	
<i>warfarin sodium tabs</i>	1	
XARELTO STARTER PACK	3	
XARELTO TABS	3	
XARELTO SUSR	5	
Blood Products and Modifiers, Other		
<i>anagrelide hydrochloride</i>	2	
ARANESP ALBUMIN FREE INJ 10MCG/0.4ML, 25MCG/0.42ML, 25MCG/ML, 40MCG/0.4ML, 40MCG/ML, 60MCG/ML	4	PA
ARANESP ALBUMIN FREE INJ 100MCG/0.5ML, 100MCG/ML, 150MCG/0.3ML, 200MCG/0.4ML, 200MCG/ML, 300MCG/0.6ML, 500MCG/ML, 60MCG/0.3ML	5	PA
<i>eltrombopag olamine</i>	5	PA
EPOGEN INJ 10000UNIT/ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
FULPHILA	5	
FYLNETRA	5	
GRANIX	5	
MOZOBIL	5	PA
MULPLETA	5	PA
NEULASTA	5	
NEULASTA ONPRO KIT	5	
NEUPOGEN	5	
NIVESTYM	5	
NPLATE	5	PA
NYVEPRIA	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
PLERIXAFOR	5	PA
PROCIT INJ 10000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
PROCIT INJ 20000UNIT/ML, 40000UNIT/ML	5	PA
PROMACTA	5	PA
REBLOZYL	5	PA
RETACRIT INJ 10000UNIT/ML, 20000UNIT/2ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
RETACRIT INJ 40000UNIT/ML	5	PA
STIMUFEND	5	
UDENYCA	5	
UDENYCA ONBODY	5	
ZIEXTENZO	5	
Hemostasis Agents		
<i>aminocaproic acid inj</i>	1	
<i>aminocaproic acid tabs</i>	2	
<i>tranexamic acid inj, tabs</i>	2	
Platelet Modifying Agents		
<i>aspirin/dipyridamole</i>	2	
<i>aspirin/dipyridamole er</i>	2	
BRILINTA	3	
CABLIVI	5	PA
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
DOPTELET	5	PA
<i>prasugrel hydrochloride</i>	2	
Cardiovascular Agents		
Alpha-adrenergic Agonists		
<i>clonidine hydrochloride tabs 0.1mg, 0.2mg, 0.3mg</i>	1	
<i>clonidine ptwk 0.1mg/24hr</i>	2	
<i>droxidopa</i>	5	
<i>midodrine hydrochloride</i>	2	
Alpha-adrenergic Blocking Agents		
<i>phenoxybenzamine hydrochloride</i>	5	
<i>phentolamine mesylate inj 5mg</i>	1	
<i>prazosin hydrochloride caps</i>	2	
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	2	
<i>irbesartan</i>	1	
<i>losartan potassium tabs</i>	1	
<i>olmesartan medoxomil tabs</i>	2	
<i>telmisartan</i>	2	
<i>valsartan tabs</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Angiotensin-converting Enzyme (ACE) Inhibitors		
<i>benazepril hydrochloride tabs</i>	1	
<i>captopril tabs</i>	2	
<i>enalapril maleate tabs</i>	1	
<i>enalapril maleate soln</i>	4	
<i>enalaprilat</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril tabs</i>	1	
<i>moexipril hydrochloride</i>	1	
<i>perindopril erbumine</i>	1	
<i>quinapril hydrochloride</i>	1	
<i>ramipril</i>	1	
<i>trandolapril</i>	1	
Antiarrhythmics		
<i>amiodarone hydrochloride inj</i>	1	
<i>amiodarone hydrochloride tabs 200mg</i>	1	
<i>amiodarone hydrochloride tabs 100mg</i>	2	
DIGOXIN SOLN	3	
<i>digoxin tabs 125mcg</i>	1	
<i>digoxin tabs 250mcg</i>	2	
<i>dofetilide</i>	2	
<i>flecainide acetate</i>	2	
LANOXIN PEDIATRIC	4	
<i>lidocaine hcl in d5w inj 5%; 4mg/ml, 5%; 8mg/ml</i>	2	
<i>lidocaine hcl/dextrose inj 5%; 4mg/ml, 5%; 8mg/ml</i>	2	
<i>lidocaine hcl inj 100mg/5ml, 50mg/5ml</i>	1	
<i>mexiletine hydrochloride caps</i>	2	
MULTAQ	4	
NEXTERONE INJ 150MG/100ML; 42.1MG/ML	3	
NEXTERONE INJ 360MG/200ML; 41.4MG/ML	5	
<i>procainamide hydrochloride</i>	1	
<i>propafenone hcl</i>	2	
<i>propafenone hydrochloride er</i>	2	
<i>propafenone hydrochloride tabs 300mg</i>	2	
<i>quinidine gluconate cr</i>	2	
<i>quinidine gluconate er</i>	2	
<i>quinidine sulfate tabs</i>	2	
<i>sorine tabs 120mg, 160mg, 80mg</i>	1	
<i>sotalol hcl (af) tabs 80mg</i>	1	
<i>sotalol hcl af</i>	1	
<i>sotalol hcl tabs 120mg, 160mg, 240mg</i>	1	
<i>sotalol hydrochloride (af)</i>	1	
<i>sotalol hydrochloride tabs 120mg, 160mg, 80mg</i>	1	
SOTYLIZE	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Beta-adrenergic Blocking Agents		
acebutolol hydrochloride	1	
atenolol tabs	1	
betaxolol hcl tabs 10mg, 20mg	4	
bisoprolol fumarate tabs 10mg, 5mg	1	
carvedilol	1	
carvedilol phosphate er	4	
esmolol hcl inj 100mg/10ml	1	
esmolol hydrochloride in sodium chloride	2	
esmolol hydrochloride in sodium chloride double strength	2	
esmolol hydrochloride/sodium chloride inj 2000mg/100ml; 4.1mg/ml, 2500mg/250ml; 5.9mg/ml	2	
HEMANGEOL	4	
KAPSPARGO SPRINKLE	4	
labetalol hydrochloride inj 5mg/ml	1	
labetalol hydrochloride tabs 100mg, 200mg, 300mg	1	
metoprolol succinate er	1	
metoprolol tartrate tabs	1	
metoprolol tartrate inj 5mg/5ml	1	
nadolol tabs 20mg, 40mg, 80mg	2	
nebivolol hydrochloride	2	
pindolol tabs	2	
propranolol hcl inj	1	
propranolol hcl oral soln 40mg/5ml	1	
propranolol hcl tabs 40mg	1	
propranolol hydrochloride er	2	
propranolol hydrochloride soln	1	
propranolol hydrochloride tabs 10mg, 20mg, 60mg, 80mg	1	
Calcium Channel Blocking Agents, Dihydropyridines		
amlodipine besylate tabs	1	
felodipine er	2	
isradipine	2	
nicardipine hcl caps 20mg	2	
nicardipine hcl caps 30mg	4	
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE INJ 40MG/200ML; 0.9%	3	
nicardipine hydrochloride/sodium chloride inj 20mg/200ml; 0.9%, 40mg/200ml; 0.9%	3	
NICARDIPINE HYDROCHLORIDE INJ 20MG/200ML; 0.9%	3	
nicardipine hydrochloride inj 2.5mg/ml	2	
nifedipine er	1	
nimodipine caps	4	
Calcium Channel Blocking Agents, Nondihydropyridines		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>cartia xt</i>	2	
<i>dilt-xr</i>	1	
<i>diltiazem hcl cd</i>	2	
<i>diltiazem hcl er cp12 90mg</i>	1	
<i>diltiazem hcl er cp24 120mg, 180mg, 240mg, 420mg</i>	2	
<i>diltiazem hcl er tb24</i>	2	
<i>diltiazem hcl inj 100mg, 50mg/10ml</i>	1	
<i>diltiazem hcl tabs 30mg, 60mg</i>	1	
<i>diltiazem hydrochloride er cp24 120mg, 180mg, 240mg</i>	1	
<i>diltiazem hydrochloride er cp24 120mg, 180mg, 240mg, 300mg, 360mg</i>	2	
<i>diltiazem hydrochloride er tb24 120mg, 180mg, 240mg, 300mg, 360mg</i>	2	
<i>diltiazem hydrochloride inj 125mg/25ml, 25mg/5ml</i>	1	
<i>diltiazem hydrochloride tabs 120mg, 90mg</i>	1	
<i>taztia xt</i>	2	
<i>tiadylt er</i>	2	
<i>verapamil hcl er cp24 100mg, 300mg</i>	2	
<i>verapamil hcl er cp24 120mg, 180mg, 240mg</i>	4	
<i>verapamil hcl er tbcr 120mg</i>	1	
<i>verapamil hcl sr cp24 360mg</i>	2	
<i>verapamil hcl sr cp24 120mg, 180mg, 240mg</i>	4	
<i>verapamil hcl tabs 40mg, 80mg</i>	1	
<i>verapamil hydrochloride er cp24</i>	2	
<i>verapamil hydrochloride er tbcr 180mg, 240mg</i>	1	
<i>verapamil hydrochloride inj</i>	1	
<i>verapamil hydrochloride tabs 120mg</i>	1	
Cardiovascular Agents, Other		
<i>acetazolamide sodium</i>	5	
<i>aliskiren</i>	4	
<i>amiloride/hydrochlorothiazide</i>	1	
<i>amlodipine besylate/benazepril hcl caps 10mg; 40mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride</i>	1	
<i>amlodipine besylate/valsartan</i>	2	
<i>atenolol/chlorthalidone</i>	1	
<i>benazepril hydrochloride/hydrochlorothiazide</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	1	
<i>candesartan cilexetil/hydrochlorothiazide</i>	2	
<i>CORLANOR TABS</i>	4	
<i>CORLANOR SOLN</i>	4	
<i>dobutamine hcl/d5w inj 5%; 1mg/ml</i>	1	B/D
<i>dobutamine hcl inj 250mg/20ml</i>	1	B/D
<i>dobutamine hydrochloride/dextrose 5%</i>	1	B/D
<i>dopamine hydrochloride</i>	1	B/D

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
dopamine hydrochloride/dextrose	1	B/D
dopamine/d5w inj 5%; 3.2mg/ml	1	B/D
enalapril maleate/hydrochlorothiazide	1	
ENTRESTO CPSP	3	
ENTRESTO TABS	3	QL(60 EA per 30 days)
fosinopril sodium/hydrochlorothiazide	2	
irbesartan/hydrochlorothiazide	1	
isosorbide dinitrate/hydralazine hydrochloride	4	
ivabradine hydrochloride	4	
lisinopril/hydrochlorothiazide	1	
losartan potassium/hydrochlorothiazide	1	
metoprolol/hydrochlorothiazide	1	
metyrosine	5	
milrinone lactate in dextrose	1	B/D
norepinephrine bitartrate inj 1mg/ml	2	
olmesartan medoxomil/hydrochlorothiazide	2	
pentoxifylline er	1	
QUINAPRIL/HYDROCHLOROTHIAZIDE TABS 25MG; 20MG	1	
quinapril/hydrochlorothiazide tabs 12.5mg; 10mg, 12.5mg; 20mg	1	
ranolazine er	2	
spironolactone/hydrochlorothiazide	1	
telmisartan/hydrochlorothiazide	2	
trandolapril/verapamil hcl er	2	
triamterene/hydrochlorothiazide caps 25mg; 37.5mg	1	
triamterene/hydrochlorothiazide tabs	1	
valsartan/hydrochlorothiazide	1	
VYNDAMAX	5	PA
Diuretics, Loop		
bumetanide inj, tabs	2	
ethacrynone sodium	5	
furosemide inj, oral soln, tabs	1	
torsemide tabs	1	
Diuretics, Potassium-sparing		
amiloride hcl tabs	1	
triamterene caps	4	
Diuretics, Thiazide		
chlorothiazide sodium	1	
chlorthalidone tabs 25mg, 50mg	1	
DIURIL SUSP	4	
hydrochlorothiazide caps, tabs	1	
indapamide tabs	1	
metolazone	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized caps 134mg, 200mg, 67mg</i>	2	
<i>fenofibrate caps 200mg, 43mg, 67mg</i>	2	
<i>fenofibrate tabs 120mg, 145mg, 160mg, 48mg, 54mg</i>	2	
<i>fenofibric acid</i>	2	
<i>fenofibric acid dr</i>	2	
<i>gemfibrozil tabs</i>	2	
Dyslipidemics, HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium</i>	1	
<i>lovastatin tabs</i>	1	
<i>pravastatin sodium</i>	1	
<i>rosuvastatin calcium tabs</i>	2	
<i>simvastatin tabs</i>	1	
Dyslipidemics, Other		
<i>cholestyramine light</i>	2	
<i>cholestyramine pack, powd</i>	2	
<i>colesevelam hydrochloride pack</i>	2	
<i>colestipol hydrochloride gran, tabs</i>	2	
<i>ezetimibe</i>	2	
<i>icosapent ethyl</i>	4	
JUXTAPID CAPS 10MG, 20MG, 30MG, 5MG	5	PA
<i>niacin er</i>	4	
<i>niacin tabs 500mg</i>	2	
<i>niacor</i>	2	
<i>omega-3-acid ethyl esters</i>	4	
PRALUENT	3	QL(2 ML per 28 days)
<i>prevalite</i>	2	
REPATHA	3	QL(3 ML per 28 days)
REPATHA PUSHTRONEX SYSTEM	3	QL(3.5 ML per 28 days)
REPATHA SURECLICK	3	QL(3 ML per 28 days)
Mineralocorticoid Receptor Antagonists		
<i>eplerenone</i>	2	
KERENDIA	4	QL(30 EA per 30 days); PA
<i>spironolactone tabs</i>	1	
Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)		
FARXIGA	3	
JARDIANCE	3	
Vasodilators, Direct-acting Arterial/Venous		
<i>isosorbide dinitrate tabs 10mg, 20mg, 30mg, 5mg</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
NITRO-BID	3	
<i>nitroglycerin in dextrose 5%</i>	2	
<i>nitroglycerin transdermal</i>	1	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>nitroglycerin inj 5mg/ml</i>	2	
<i>nitroglycerin translingual soln 0.4mg/spray</i>	2	
<i>nitroglycerin subl 0.3mg, 0.4mg, 0.6mg</i>	2	
VERQUVO	3	QL(30 EA per 30 days); PA
Vasodilators, Direct-acting Arterial		
<i>hydralazine hcl inj</i>	1	
<i>hydralazine hydrochloride tabs</i>	1	
<i>minoxidil tabs</i>	1	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>amphetamine/dextroamphetamine cp24</i>	2	QL(120 EA per 30 days)
<i>amphetamine/dextroamphetamine tabs</i>	2	QL(60 EA per 30 days)
<i>dextroamphetamine sulfate er</i>	4	QL(180 EA per 30 days)
<i>dextroamphetamine sulfate soln</i>	4	QL(1800 ML per 30 days)
<i>dextroamphetamine sulfate tabs 10mg, 5mg</i>	2	QL(180 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<i>atomoxetine</i>	2	
<i>atomoxetine hydrochloride caps 10mg, 25mg, 40mg, 60mg, 80mg</i>	2	
<i>clonidine hydrochloride er</i>	2	
<i>clonidine hydrochloride tb12 0.1mg</i>	2	
<i>dexmethylphenidate hcl er cp24 15mg, 20mg, 30mg, 35mg</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hcl tabs 10mg, 5mg</i>	2	QL(60 EA per 30 days)
<i>dexmethylphenidate hydrochloride er cp24 10mg, 15mg, 30mg, 40mg, 5mg</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hydrochloride cp24</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hydrochloride tabs 2.5mg</i>	2	QL(60 EA per 30 days)
<i>methylphenidate hydrochloride cd</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er cp24 10mg, 20mg, 30mg, 40mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tb24 18mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 10mg, 20mg</i>	2	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 27mg, 36mg, 54mg, 72mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 18mg</i>	4	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride chew 10mg</i>	4	QL(180 EA per 30 days)
<i>methylphenidate hydrochloride chew 2.5mg, 5mg</i>	4	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride tabs</i>	2	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride soln</i>	2	QL(900 ML per 30 days)
Central Nervous System, Other		
<i>butalbital/acetaminophen/caffeine caps</i>	2	
<i>butalbital/acetaminophen/caffeine tabs 325mg; 50mg; 40mg</i>	2	
<i>butalbital/aspirin/caffeine caps</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>caffeine citrate inj</i>	2	
<i>caffeine citrate oral soln 20mg/ml</i>	2	
COBENFY	5	QL(60 EA per 30 days); PA NSO
COBENFY STARTER PACK	5	QL(112 EA per 365 days); PA NSO
EXSERVAN	5	
INGREZZA	5	PA
NUEDEXTA	5	PA
<i>riluzole</i>	4	
<i>tetrabenazine tabs 12.5mg</i>	4	PA
<i>tetrabenazine tabs 25mg</i>	5	PA
VEOZAH	4	QL(30 EA per 30 days); PA
Fibromyalgia Agents		
SAVELLA	3	PA NSO
SAVELLA TITRATION PACK	3	PA NSO
Multiple Sclerosis Agents		
AVONEX PEN	5	
AVONEX INJ 30MCG/0.5ML	5	
BETASERON	5	
<i>dalfampridine er</i>	3	PA
<i>dimethyl fumarate</i>	4	QL(60 EA per 30 days)
<i>dimethyl fumarate starterpack</i>	5	QL(120 EA per 365 days)
EXTAVIA	5	
<i>fingolimod hydrochloride</i>	5	
GILENYA CAPS 0.25MG	5	
<i>glatiramer acetate</i>	5	
<i>glatopa</i>	5	
MAVENCLAD	5	PA
MAYZENT STARTER PACK TBPK 0.25MG	4	QL(14 EA per 365 days)
MAYZENT STARTER PACK TBPK 0.25MG	5	QL(24 EA per 365 days)
MAYZENT TABS 0.25MG	5	QL(120 EA per 30 days)
MAYZENT TABS 1MG, 2MG	5	QL(30 EA per 30 days)
<i>mitoxantrone hcl inj 2mg/ml</i>	2	
PLEGRIDY	5	
PLEGRIDY STARTER PACK	5	
REBIF	5	
REBIF REBIDOSE	5	
REBIF REBIDOSE TITRATION PACK	5	
REBIF TITRATION PACK	5	
<i>teriflunomide</i>	5	
TYSBRI	5	PA
VUMERTY	5	
ZEPOSIA	5	PA
ZEPOSIA 7-DAY STARTER PACK	5	PA
ZEPOSIA STARTER KIT	5	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
Dental and Oral Agents		
<i>Dental and Oral Agents</i>		
<i>cevimeline hydrochloride</i>	2	
<i>chlorhexidine gluconate soln</i>	1	
<i>doxycycline hyclate tabs 20mg</i>	2	
<i>KEPIVANCE INJ 5.16MG</i>	5	PA
<i>kourzeq</i>	2	
<i>lidocaine hcl mouth/throat soln 4%</i>	1	
<i>lidocaine hydrochloride viscous</i>	1	
<i>lidocaine viscous</i>	1	
<i>oralone dental paste</i>	2	
<i>periogard</i>	1	
<i>pilocarpine hydrochloride tabs 5mg, 7.5mg</i>	2	
<i>triamcinolone acetonide dental paste</i>	2	
Dermatological Agents		
<i>Acne and Rosacea Agents</i>		
<i>accutane</i>	4	
<i>acitretin</i>	4	
<i>adapalene gel 0.1%</i>	2	
<i>amnesteem caps 30mg</i>	4	
<i>amnesteem caps 10mg, 20mg, 40mg</i>	4	
<i>azelaic acid</i>	2	
<i>AZELEX</i>	4	PA
<i>claravais</i>	4	
<i>isotretinoin caps 10mg, 20mg, 30mg, 40mg</i>	4	
<i>isotretinoin caps 25mg, 35mg</i>	5	
<i>metronidazole crea 0.75%</i>	2	
<i>metronidazole gel 0.75%, 1%</i>	2	
<i>metronidazole lotn 0.75%</i>	2	
<i>tazarotene crea 0.05%</i>	4	PA
<i>tazarotene crea 0.1%</i>	4	PA
<i>tazarotene gel</i>	4	PA
<i>tretinoiin crea 0.025%</i>	2	PA
<i>tretinoiin crea 0.05%, 0.1%</i>	4	PA
<i>tretinoiin gel 0.05%</i>	2	PA
<i>tretinoiin gel 0.01%, 0.025%</i>	4	PA
<i>zenatane</i>	4	
<i>Dermatitis and Pruritus Agents</i>		
<i>ADBRY INJ 300MG/2ML</i>	5	PA
<i>ala-cort</i>	1	
<i>alclometasone dipropionate</i>	1	
<i>amcinonide oint</i>	1	
<i>ammonium lactate lotn</i>	1	QL(400 GM per 30 days)
<i>betamethasone dipropionate augmented</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate crea, lotn, oint</i>	2	
<i>betamethasone valerate crea, lotn, oint</i>	2	
<i>clobetasol propionate e</i>	2	
<i>clobetasol propionate emollient crea</i>	2	
<i>clobetasol propionate emollient foam</i>	4	
<i>clobetasol propionate crea 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	4	
<i>clobetasol propionate gel, oint, soln</i>	2	
<i>desonide crea, lotn, oint</i>	2	
<i>desoximetasone crea 0.25%</i>	2	
<i>desoximetasone crea 0.05%</i>	4	QL(15 GM per 30 days)
DOXEPI N HYDROCHLORIDE CREA 5%	3	QL(90 GM per 30 days)
<i>fluocinolone acetonide body</i>	2	
<i>fluocinolone acetonide scalp</i>	2	
<i>fluocinolone acetonide topical</i>	2	
<i>fluocinolone acetonide crea 0.01%, 0.025%</i>	2	
<i>fluocinolone acetonide oint 0.025%</i>	2	
<i>fluocinolone acetonide soln 0.01%</i>	2	
<i>fluocinonide crea 0.05%</i>	4	
<i>fluocinonide crea 0.1%</i>	4	QL(30 GM per 30 days)
<i>fluocinonide soln</i>	2	
<i>fluocinonide gel, oint</i>	4	
<i>fluticasone propionate crea 0.05%</i>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halobetasol propionate crea, oint</i>	2	
<i>hydrocortisone butyrate (lipid)</i>	1	
<i>hydrocortisone butyrate (lipophilic)</i>	1	
<i>hydrocortisone butyrate crea, oint, soln</i>	1	
<i>hydrocortisone crea 1%, 2.5%</i>	1	
<i>hydrocortisone lotn 2.5%</i>	1	
<i>hydrocortisone oint 1%, 2.5%</i>	1	
<i>mometasone furoate</i>	1	
<i>pimecrolimus</i>	4	
<i>selenium sulfide</i>	1	
<i>tacrolimus oint 0.03%</i>	2	
<i>tacrolimus oint 0.1%</i>	2	QL(30 GM per 30 days)
<i>triamcinolone acetonide aers, crea, lotn</i>	1	
<i>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</i>	1	
<i>triderm</i>	1	
Dermatological Agents, Other		
<i>calcipotriene soln</i>	2	
<i>calcipotriene crea, oint</i>	4	
<i>calcitriol oint 3mcg/gm</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>clotrimazole/betamethasone dipropionate</i>	2	
<i>diclofenac sodium gel 3%</i>	4	QL(100 GM per 30 days)
<i>FLUOROURACIL CREA 0.5%</i>	5	QL(30 GM per 30 days)
<i>fluorouracil crea 5%</i>	2	
<i>fluorouracil external soln 2%, 5%</i>	2	
<i>imiquimod crea 5%</i>	2	
<i>methoxsalen caps</i>	5	
<i>nystatin/triamcinolone</i>	2	
<i>nystatin/triamcinolone acetonide oint</i>	2	
<i>OTEZLA TABS 20MG, 30MG</i>	5	PA
<i>podofilox soln</i>	1	
<i>REGRANEX</i>	5	PA
<i>SANTYL</i>	4	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
Pediculicides/Scabicides		
<i>ivermectin crea 1%</i>	4	QL(45 GM per 30 days)
<i>malathion</i>	1	
<i>permethrin crea</i>	2	
Topical Anti-infectives		
<i>acyclovir oint 5%</i>	4	
<i>ciclodan soln</i>	2	
<i>ciclopirox nail lacquer</i>	2	
<i>ciclopirox olamine</i>	2	
<i>ciclopirox gel, sham, susp</i>	2	
<i>clindacin</i>	2	
<i>clindamycin phosphate gel 1%</i>	2	
<i>clindamycin phosphate lotn 1%</i>	2	QL(60 ML per 30 days)
<i>clindamycin phosphate external soln 1%</i>	2	
<i>ery</i>	2	
<i>erythromycin gel 2%</i>	2	
<i>erythromycin soln 2%</i>	2	
<i>mupirocin oint</i>	2	
<i>SULFAMYLYON CREA</i>	4	
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
AMINOSYN II INJ 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 405MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 750MG/100ML, 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 270MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 400MG/100ML; 200MG/100ML; 500MG/100ML	3	B/D
AMINOSYN-PF 7% INJ 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 300MG/100ML; 570MG/100ML; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	3	B/D
AMINOSYN-PF INJ 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	3	B/D
<i>carglumic acid</i>	5	PA
CLINIMIX 4.25%/DEXTROSE 10%	3	B/D
CLINIMIX 4.25%/DEXTROSE 5%	3	B/D
CLINIMIX 5%/DEXTROSE 15%	3	B/D
CLINIMIX 5%/DEXTROSE 20%	3	B/D
CLINIMIX 6/5	3	B/D
CLINIMIX 8/10	3	B/D
CLINIMIX 8/14	3	B/D
CLINIMIX E 2.75%/DEXTROSE 5%	3	B/D
CLINIMIX E 4.25%/DEXTROSE 10%	3	B/D
CLINIMIX E 4.25%/DEXTROSE 5%	3	B/D
CLINIMIX E 5%/DEXTROSE 15%	3	B/D
CLINIMIX E 5%/DEXTROSE 20%	3	B/D
CLINIMIX E 8/10	3	B/D
CLINIMIX E 8/14	3	B/D
CLINISOL SF 15%	3	B/D
<i>dextrose 5% /electrolyte #48 viaflex</i>	1	
<i>dextrose 10%</i>	1	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>dextrose 10%/sodium chloride 0.2%</i>	1	
<i>dextrose 10%/sodium chloride 0.45%</i>	1	
<i>dextrose 2.5%/sodium chloride 0.45%</i>	1	
<i>dextrose 25% inj 250mg/ml</i>	1	
<i>dextrose 5%</i>	1	
<i>dextrose 5%/lactated ringers inj 2.7meq/l; 109meq/l; 5%; 28meq/l; 4meq/l; 130meq/l</i>	1	
<i>dextrose 5%/sodium chloride 0.2%</i>	1	
<i>dextrose 5%/sodium chloride 0.3%</i>	1	
<i>dextrose 5%/sodium chloride 0.33%</i>	1	
<i>dextrose 5%/sodium chloride 0.45%</i>	1	
<i>dextrose 5%/sodium chloride 0.9%</i>	1	
<i>dextrose 50%</i>	1	
<i>dextrose/sodium chloride</i>	1	
<i>dextrose inj 20%</i>	1	
<i>fluoride chew 0.25mg, 0.5mg, 1mg</i>	2	
<i>glucose (dextrose) 50%</i>	1	
<i>IONOSOL-MB/DEXTROSE 5% INJ 22MEQ/L; 5%; 23MEQ/L; 3MEQ/L; 3MMOLE/L; 20MEQ/L; 25MEQ/L</i>	3	
<i>ISOLYTE-P/DEXTROSE 5%</i>	3	
<i>ISOLYTE-S PH 7.4</i>	3	
<i>ISOLYTE-S INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L</i>	3	
<i>kcl 0.075%/d5w/nacl 0.45% inj 5%; 10meq/l; 0.45%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.2%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.225% inj 5%; 20meq/l; 0.225%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.45% inj 5%; 20meq/l; 0.45%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.9% inj 5%; 20meq/l; 0.9%</i>	1	
<i>kcl 0.3%/d5w/nacl 0.45% inj 5%; 40meq/l; 0.45%</i>	1	
<i>kcl 0.3%/d5w/nacl 0.9% inj 5%; 40meq/l; 0.9%</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>magnesium sulfate in d5w inj 5%; 1gm/100ml</i>	1	
<i>magnesium sulfate/dextrose inj 5%; 1gm/100ml</i>	1	
<i>MAGNESIUM SULFATE INJ 20GM/500ML</i>	1	
<i>magnesium sulfate inj 2gm/50ml, 40gm/1000ml, 4gm/100ml, 4gm/50ml</i>	1	
<i>magnesium sulfate inj 50%</i>	2	
<i>multiple electrolytes injection type 1</i>	1	
<i>NORMOSOL-M/D5W</i>	3	
<i>NORMOSOL-R</i>	3	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
PLENAMINE	3	B/D
<i>potassium chloride er cpcr</i>	1	
POTASSIUM CHLORIDE ER TBCR 15MEQ	1	
<i>potassium chloride er tbcr 10meq, 15meq, 20meq, 8meq</i>	1	
<i>potassium chloride/dextrose/lactated ringers inj 3meq/l; 149meq/l; 5%; 28meq/l; 24meq/l; 130meq/l</i>	1	
<i>potassium chloride/dextrose/sodium chloride inj 5%; 10meq/l; 0.45%, 5%; 20meq/l; 0.225%, 5%; 20meq/l; 0.45%, 5%; 20meq/l; 0.9%, 5%; 30meq/l; 0.45%, 5%; 40meq/l; 0.45%, 5%; 40meq/l; 0.9%</i>	1	
<i>potassium chloride/dextrose inj 5%; 20meq/l</i>	1	
<i>potassium chloride/sodium chloride inj 20meq/l; 0.45%, 20meq/l; 0.9%, 40meq/l; 0.9%</i>	1	
<i>potassium chloride inj 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 2meq/ml, 40meq/100ml</i>	1	
<i>potassium chloride oral soln 10%</i>	2	
<i>potassium citrate er</i>	1	
PREMASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
PROSOL	3	B/D
<i>ringers injection inj 4.5meq/l; 156meq/l; 4meq/l; 147meq/l</i>	1	
<i>sodium chloride 0.45% inj</i>	2	
<i>sodium chloride inj 0.45%, 0.9%, 3%, 5%</i>	2	
<i>sodium fluoride chew 0.25mg, 0.5mg, 1mg</i>	2	
SODIUM FLUORIDE SOLN 0.5MG/ML	2	
TRAVASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 500MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
TROPHAMINE INJ 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	3	B/D
<i>Electrolyte/Mineral/Metal Modifiers</i>		
CHEMET	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>deferasirox tbs 125mg</i>	3	PA
<i>deferasirox tbs 250mg, 500mg</i>	5	PA
<i>deferiprone</i>	5	
FERRIPROX TWICE-A-DAY	5	
FERRIPROX SOLN	5	
FERRIPROX TABS 1000MG	5	
JYNARQUE TABS	5	QL(120 EA per 30 days); PA
JYNARQUE TBPK	5	QL(56 EA per 28 days); PA
<i>penicillamine tabs</i>	5	
<i>tolvaptan tbpk</i>	5	QL(56 EA per 28 days); PA
TOLVAPTAN TABS 15MG	5	QL(120 EA per 30 days); PA
<i>tolvaptan tabs 30mg</i>	5	QL(120 EA per 30 days); PA
<i>trientine hydrochloride caps 250mg</i>	5	
Phosphate Binders		
<i>calcium acetate tabs 667mg</i>	2	
FOSRENOL PACK	5	
<i>lanthanum carbonate chew 1000mg</i>	5	
<i>sevelamer carbonate tabs</i>	4	
<i>sevelamer carbonate pack 2.4gm</i>	4	
<i>sevelamer hydrochloride</i>	4	
Potassium Binders		
<i>kionex susp</i>	1	
LOKELMA	4	QL(90 EA per 30 days)
<i>sodium polystyrene sulfonate powd</i>	1	
<i>sps</i>	1	
VELTASSA PACK 1GM	4	
VELTASSA PACK 16.8GM, 25.2GM, 8.4GM	4	
Vitamins		
<i>prenatal 19 tabs 100mg; 1000unit; 200mg; 7mg; 400unit; 12mcg; 25mg; 29mg; 1mg; 15mg; 20mg; 3mg; 30unit; 20mg</i>	2	
<i>prenatal tabs 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 1mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg</i>	2	
Gastrointestinal Agents		
Anti-Constipation Agents		
<i>constulose</i>	2	
<i>enulose</i>	2	
<i>generlac</i>	2	
KRISTALOSE PACK 10GM	3	
<i>lactulose soln</i>	2	
LINZESS	3	QL(30 EA per 30 days)
LUBIPROSTONE	4	QL(60 EA per 30 days)
MOVANTIK	4	QL(30 EA per 30 days)
RELISTOR INJ	5	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
SYMPROIC	4	QL(30 EA per 30 days)
Anti-Diarrheal Agents		
alosetron hydrochloride tabs 1mg	5	
diphenoxylate hydrochloride/atropine sulfate	4	
diphenoxylate/atropine liqd	4	
loperamide hydrochloride caps	2	
VIBERZI	5	PA
XERMELO	5	QL(90 EA per 30 days); PA
Antispasmodics, Gastrointestinal		
dicyclomine hcl soln	2	
dicyclomine hydrochloride caps, tabs	2	
glycopyrrolate oral soln	2	
glycopyrrolate inj 0.2mg/ml, 0.4mg/2ml, 1mg/5ml, 4mg/20ml	2	
GLYCOPYRROLATE TABS 1.5MG	4	
glycopyrrolate tabs 1mg, 2mg	2	
methscopolamine bromide tabs	2	
Gastrointestinal Agents, Other		
GATTEX	5	PA
gavilyte-c	2	
gavilyte-g	2	
gavilyte-n/flavor pack	2	
metoclopramide hcl soln	2	
metoclopramide hydrochloride inj, tabs	2	
metoclopramide odt tbdp 5mg	2	
NITROGLYCERIN OINT 0.4%	4	
OCALIVA	5	QL(30 EA per 30 days); PA
peg-3350/electrolytes	2	
peg-3350/electrolytes/ascorbate	2	
peg-3350/nacl/na bicarbonate/kcl	2	
RECTIV	4	
SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE SOLN 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	4	
sodium sulfate/potassium sulfate/magnesium sulfate soln 1.6gm/177ml; 3.13gm/177ml; 17.5gm/177ml	4	
ursodiol caps 300mg	4	
ursodiol tabs	3	
VOWST	5	PA
XIFAXAN TABS 200MG	4	PA
XIFAXAN TABS 550MG	5	PA
Histamine2 (H2) Receptor Antagonists		
cimetidine tabs	2	
famotidine premixed	2	
famotidine inj 200mg/20ml, 20mg/2ml, 40mg/4ml	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>famotidine tabs 20mg, 40mg</i>	2	
<i>nizatidine caps</i>	2	
Protectants		
<i>misoprostol</i>	1	
<i>sucralfate tabs</i>	2	
Proton Pump Inhibitors		
<i>esomeprazole magnesium cpdr</i>	2	
<i>lansoprazole cpdr</i>	2	
<i>omeprazole dr cpdr 10mg, 40mg</i>	2	
<i>omeprazole cpdr 20mg, 40mg</i>	2	
<i>pantoprazole sodium inj, tbec</i>	2	
<i>rabeprazole sodium</i>	2	
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
ALDURAZYME	5	PA
ARALAST NP INJ 1000MG, 500MG	5	PA
<i>betaine anhydrous</i>	5	
CERDELGA	5	PA
CEREZYME	5	PA
CHOLBAM	5	PA
CREON CPEP 120000UNIT; 24000UNIT; 76000UNIT, 15000UNIT; 3000UNIT; 9500UNIT, 180000UNIT; 36000UNIT; 114000UNIT, 30000UNIT; 6000UNIT; 19000UNIT, 60000UNIT; 12000UNIT; 38000UNIT	3	
<i>cromolyn sodium conc 100mg/5ml</i>	4	
CRYSVITA	5	PA
CYSTAGON	4	PA
<i>dichlorphenamide</i>	5	PA
ELAPRASE	5	PA
ELELYSO	5	PA
ENDARI	5	
EXONDYS 51	5	PA
FABRAZYME	5	PA
GALAFOLD	5	PA
GLASSIA INJ 1000MG/50ML	5	PA
KANUMA	5	PA
<i>l-glutamine</i>	5	
LUMIZYME	5	PA
<i>miglustat</i>	5	PA
NAGLAZYME	5	PA
<i>nitisinone</i>	5	PA
ORFADIN SUSP	5	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
PANCREAZE CPEP 15200UNIT; 2600UNIT; 8800UNIT, 24600UNIT; 4200UNIT; 14200UNIT, 61500UNIT; 10500UNIT; 35500UNIT, 98400UNIT; 16800UNIT; 56800UNIT	3	
PANCREAZE CPEP 149900UNIT; 37000UNIT; 97300UNIT, 83900UNIT; 21000UNIT; 54700UNIT	5	
PROCYSBI	5	PA
PROLASTIN-C	5	PA
RAVICTI	5	PA
<i>sapropterin dihydrochloride</i>	5	PA
<i>sodium phenylbutyrate tabs</i>	5	
STRENSIQ	5	PA
SUCRAID	5	PA
VIMIZIM	5	PA
VPRIV	5	PA
VYNDAQEL	5	PA
WELIREG	5	PA NSO
XIAFLEX	5	PA
XURIDEN	5	QL(120 EA per 30 days); PA
<i>yargesa</i>	5	PA
ZEMAIRA	5	PA
ZENPEP CPEP 105000UNIT; 25000UNIT; 79000UNIT, 14000UNIT; 3000UNIT; 10000UNIT, 168000UNIT; 40000UNIT; 126000UNIT, 24000UNIT; 5000UNIT; 17000UNIT, 252600UNIT; 60000UNIT; 189600UNIT, 42000UNIT; 10000UNIT; 32000UNIT, 63000UNIT; 15000UNIT; 47000UNIT, 84000UNIT; 20000UNIT; 63000UNIT	3	
Genitourinary Agents		
<i>Antispasmodics, Urinary</i>		
DARIFENACIN HYDROBROMIDE ER	3	
<i>fesoterodine fumarate er</i>	2	
<i>flavoxate hcl</i>	1	
GEMTESA	4	
MYRBETRIQ	3	
<i>oxybutynin chloride er</i>	2	
<i>oxybutynin chloride soln, tabs</i>	2	
<i>solifenacain succinate</i>	2	
<i>tolterodine tartrate er cp24 4mg</i>	2	
<i>tolterodine tartrate er cp24 2mg</i>	2	
<i>tolterodine tartrate tabs 1mg</i>	2	
<i>tolterodine tartrate tabs 2mg</i>	4	
<i>trospium chloride</i>	2	
<i>Benign Prostatic Hypertrophy Agents</i>		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>alfuzosin hcl er</i>	2	
<i>doxazosin mesylate</i>	1	
<i>doxazosin tabs 2mg</i>	1	
<i>dutasteride caps</i>	2	
<i>finasteride tabs</i>	1	
<i>silodosin caps 8mg</i>	2	
<i>silodosin caps 4mg</i>	2	
<i>tadalafil tabs 2.5mg, 5mg</i>	4	QL(30 EA per 30 days); PA
<i>tamsulosin hydrochloride</i>	1	
<i>terazosin hcl caps 10mg, 1mg, 5mg</i>	1	
<i>terazosin hydrochloride caps 2mg</i>	1	
Genitourinary Agents, Other		
<i>acetic acid 0.25%</i>	2	
<i>bethanechol chloride tabs</i>	2	
ELMIRON	5	
LITHOSTAT	4	
PHEXXI	4	
RENACIDIN SOLN 1980.6MG/30ML; 59.4MG/30ML; 980.4MG/30ML	4	
RIMSO-50	4	
THIOLA EC	5	
<i>tiopronin</i>	5	
<i>tiopronin dr</i>	5	
<i>venxxiva</i>	5	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>betamethasone sodium phosphate/betamethasone acetate</i>	1	
DEXAMETHASONE INTENSOL	3	
DEXAMETHASONE SODIUM PHOSPHATE +RFID	2	
<i>dexamethasone sodium phosphate inj 100mg/10ml, 10mg/ml, 120mg/30ml, 20mg/5ml, 4mg/ml</i>	2	
<i>dexamethasone elix, soln</i>	2	
<i>dexamethasone tabs 0.5mg, 0.75mg, 1.5mg, 1mg, 2mg, 4mg, 6mg</i>	2	
<i>fludrocortisone acetate tabs</i>	1	
<i>hydrocortisone tabs 10mg, 20mg, 5mg</i>	2	
<i>methylprednisolone acetate inj 40mg/ml, 50mg/ml, 80mg/ml</i>	2	
<i>methylprednisolone dose pack tbpk</i>	2	
<i>methylprednisolone sodium succinate</i>	2	
<i>methylprednisolone sodiumsuccinate inj 40mg</i>	2	
<i>methylprednisolone tabs</i>	2	
<i>prednisolone sodium phosphate odt</i>	2	
<i>prednisolone sodium phosphate oral soln 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml, 5mg/5ml</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone soln</i>	2	
<i>prednisone tbpk</i>	1	
<i>prednisone tabs 10mg, 1mg, 2.5mg, 20mg, 50mg, 5mg</i>	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>chorionic gonadotropin</i>	4	PA
<i>desmopressin acetate tabs</i>	2	
<i>desmopressin acetate inj</i>	5	
DESMOPRESSIN ACETATE NASAL SOLN 0.01%	2	
DESMOPRESSIN ACETATE NASAL SOLN 1.5MG/ML	5	
<i>desmopressin acetate nasal soln 0.01%</i>	2	
INCRELEX	5	PA
ISTURISA TABS 1MG, 5MG	5	PA
LUPRON DEPOT-PED (6-MONTH)	5	PA
NORDITROPIN FLEXPRO	5	PA
NOVAREL INJ 5000UNIT	4	PA
OMNITROPE	5	PA
PREGNYL	4	PA
<i>pregnyl w/diluent benzyl alcohol/nacl</i>	4	PA
SEROSTIM	5	PA
<i>vasopressin +rfid</i>	2	
<i>vasopressin inj 20unit/ml</i>	2	
<i>vasostrict</i>	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
<i>danazol caps</i>	4	
<i>testosterone cypionate inj 100mg/ml, 200mg/ml</i>	2	
<i>testosterone enanthate inj</i>	2	
<i>testosterone pump</i>	4	PA
<i>testosterone gel 10mg/act</i>	2	PA
<i>testosterone gel 20.25mg/1.25gm, 25mg/2.5gm, 40.5mg/2.5gm, 50mg/5gm</i>	4	PA
Estrogens		
<i>afirmelle</i>	2	
<i>altavera</i>	2	
<i>alyacen 1/35</i>	2	
<i>alyacen 7/7/7 tabs 35mcg; 0</i>	2	
<i>amabelz tabs 1mg; 0.5mg</i>	2	
<i>amethyst</i>	2	
ANNOVERA	4	
<i>apri</i>	2	
<i>aranelle</i>	2	
<i>ashlyna</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>aubra eq</i>	2	
<i>aurovela 1.5/30</i>	2	
<i>aurovela 1/20</i>	2	
<i>aurovela 24 fe</i>	2	
<i>aurovela fe 1.5/30</i>	2	
<i>aurovela fe 1/20</i>	2	
<i>aviane</i>	2	
<i>ayuna</i>	2	
<i>azurette</i>	2	
<i>balziva</i>	2	
<i>blisovi 24 fe</i>	2	
<i>blisovi fe 1.5/30</i>	2	
<i>blisovi fe 1/20</i>	2	
<i>briellyn</i>	2	
<i>camrese</i>	2	
<i>camrese lo</i>	2	
<i>charlotte 24 fe</i>	2	
<i>chateal eq</i>	2	
<i>cryselle-28</i>	2	
<i>cyred eq</i>	2	
<i>dasetta 1/35</i>	2	
<i>dasetta 7/7/7</i>	2	
<i>daysee</i>	2	
<i>delyla</i>	2	
DEPO-ESTRADIOL INJ 5MG/ML	4	
<i>desogestrel/ethinyl estradiol</i>	2	
<i>dolishale</i>	2	
<i>dotti</i>	2	
<i>drospirenone/ethinyl estradiol</i>	2	
DROSPIRENONE/ETHINYL ESTRADIOL/LEVOMEFOLATE CALCIUM TABS 3MG; 0.03MG; 0.451MG	2	
<i>drospirenone/ethinyl estradiol/levomefolate calcium tabs 3mg; 0.02mg; 0.451mg</i>	2	
<i>elonest</i>	2	
<i>eluryng</i>	2	
<i>enilloring</i>	2	
<i>enpresse-28</i>	2	
<i>enskyce</i>	2	
<i>estarrylla</i>	2	
<i>estradiol valerate inj 20mg/ml, 40mg/ml</i>	1	
<i>estradiol/norethindrone acetate tabs 1mg; 0.5mg</i>	2	
ESTRADIOL VAGINAL TABS	3	
<i>estradiol crea, pttw, ptwk, oral tabs</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
ESTRING	3	
<i>ethynodiol diacetate/ethinyl estradiol</i>	2	
<i>etonogestrel/ethinyl estradiol</i>	4	
<i>falmina</i>	2	
<i>feirza 1.5/30</i>	2	
<i>feirza 1/20</i>	2	
FEMRING	4	
<i>finzala</i>	2	
<i>fyavolv</i>	2	
<i>galbriela</i>	2	
<i>gemmily</i>	2	
<i>hailey 1.5/30</i>	2	
<i>hailey 24 fe</i>	2	
<i>hailey fe 1.5/30</i>	2	
<i>hailey fe 1/20</i>	2	
<i>iclevia</i>	2	
IMVEXXY MAINTENANCE PACK	4	PA
IMVEXXY STARTER PACK	4	PA
<i>introsafe</i>	2	
<i>isibloom</i>	2	
<i>jaimiess</i>	2	
<i>jasmiel</i>	2	
<i>jinteli</i>	2	
<i>jolessa</i>	2	
<i>joyeaux</i>	2	
<i>juleber</i>	2	
<i>junel 1.5/30</i>	2	
<i>junel 1/20</i>	2	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	
<i>junel fe 24</i>	2	
<i>kaitlib fe</i>	2	
<i>kalliga</i>	2	
<i>kariva</i>	2	
<i>kelnor 1/35</i>	2	
<i>kelnor 1/50</i>	2	
<i>kurvelo</i>	2	
<i>larin 1.5/30</i>	2	
<i>larin 1/20</i>	2	
<i>larin 24 fe</i>	2	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>layolis fe</i>	2	
<i>leena</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>lessina</i>	2	
<i>levonest</i>	2	
<i>levonorgestrel and ethinyl estradiol</i>	2	
<i>levonorgestrel/ethinyl estradiol</i>	2	
<i>levonorgestrel/ethinyl estradiol/ferrous bisglycinate</i>	2	
<i>levora 0.15/30-28</i>	2	
LO LOESTRIN FE	4	
<i>lo-zumandimine</i>	2	
<i>lojaimies</i>	2	
<i>loryna</i>	2	
<i>low-ogestrel</i>	2	
<i>lutera</i>	2	
<i>lyllana</i>	4	
<i>marlissa</i>	2	
<i>merzee</i>	2	
<i>mibelas 24 fe</i>	2	
<i>microgestin 1.5/30</i>	2	
<i>microgestin 1/20</i>	2	
<i>microgestin 24 fe</i>	2	
<i>microgestin fe 1.5/30</i>	2	
<i>microgestin fe 1/20</i>	2	
<i>mil</i>	2	
<i>mimvey</i>	2	
<i>minzoya</i>	2	
<i>mono-linyah</i>	2	
NATAZIA	4	
<i>necon 0.5/35-28</i>	2	
NEXTSTELLIS	4	
<i>nikki</i>	2	
<i>norelgestromin/ethinyl estradiol</i>	2	
<i>norethindrone & ethinyl estradiol ferrous fumarate</i>	2	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	2	
<i>norethindrone acetate/ethinyl estradiol tabs</i>	2	
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	2	
<i>norgestimate/ethinyl estradiol</i>	2	
<i>nortrel 0.5/35 (28)</i>	2	
<i>nortrel 1/35</i>	2	
<i>nortrel 7/7/7</i>	2	
<i>nylia 1/35</i>	2	
<i>nylia 7/7/7</i>	2	
<i>nymyo</i>	2	
<i>ocella</i>	2	
<i>philith</i>	2	
<i>pimtrea</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>portia-28</i>	2	
PREMARIN CREA	3	
PREMARIN INJ	4	
PREMPRO	4	
<i>reclipsen</i>	2	
<i>rivelsa</i>	2	
<i>rosyrah</i>	2	
<i>setlakin</i>	2	
<i>simliya</i>	2	
<i>simpesse</i>	2	
<i>sprintec 28</i>	2	
<i>sronyx</i>	2	
<i>syeda</i>	2	
<i>tarina 24 fe</i>	2	
<i>tarina fe 1/20 eq</i>	2	
<i>taysofy</i>	2	
<i>tilia fe</i>	2	
<i>tri-estarrylla</i>	2	
<i>tri-legest fe</i>	2	
<i>tri-linyah</i>	2	
<i>tri-lo-estarrylla</i>	2	
<i>tri-lo-marzia</i>	2	
<i>tri-lo-mili</i>	2	
<i>tri-lo-sprintec</i>	2	
<i>tri-mili</i>	2	
<i>tri-nymyo</i>	2	
<i>tri-sprintec</i>	2	
<i>tri-vylibra</i>	2	
<i>tri-vylibra lo</i>	2	
<i>trivora-28</i>	2	
<i>turqoz</i>	2	
TWIRLA	4	
TYBLUME	2	
<i>tydemy</i>	2	
<i>valtya 1/50</i>	2	
VELIVET	2	
<i>vestura</i>	2	
<i>vienna</i>	2	
<i>viorele</i>	2	
<i>volnea</i>	2	
<i>vyfemla</i>	2	
<i>vylbra</i>	2	
<i>wera</i>	2	
<i>wymzya fe</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>xarah fe</i>	2	
<i>xelria fe</i>	2	
<i>xulane</i>	2	
YUVAFEM	3	
<i>zafemy</i>	4	
<i>zovia 1/35</i>	2	
<i>zumandimine</i>	2	
Progestins		
<i>camila</i>	2	
CRINONE	4	PA
<i>deblitane</i>	2	
DEPO-SUBQ PROVERA 104	3	
<i>emzahh</i>	2	
<i>errin</i>	2	
<i>gallifrey</i>	1	
<i>heather</i>	2	
<i>incassia</i>	2	
<i>jencycla</i>	2	
LILETTA	3	
<i>lyleq</i>	2	
<i>lyza</i>	2	
<i>medroxyprogesterone acetate inj, tabs</i>	1	
<i>megestrol acetate tabs</i>	2	PA NSO
MEGESTROL ACETATE SUSP 625MG/5ML	4	PA NSO
<i>megestrol acetate susp 40mg/ml</i>	4	PA NSO
<i>meleya</i>	2	
NEXPLANON	3	
<i>nora-be</i>	2	
<i>norethindrone acetate tabs</i>	1	
<i>norethindrone tabs</i>	1	
<i>norlyroc</i>	2	
<i>progesterone caps, inj</i>	1	
<i>sharobel</i>	2	
SLYND	4	
Selective Estrogen Receptor Modifying Agents		
OSPHENA	4	QL(30 EA per 30 days); PA
<i>raloxifene hydrochloride</i>	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
ADTHYZA TABS 120MG, 15MG, 30MG, 60MG, 90MG	4	
ARMOUR THYROID	4	
<i>euthyrox tabs 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg</i>	1	
<i>euthyrox tabs 88mcg</i>	2	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>levo-t</i>	1	
<i>levothyroxine sodium tabs</i>	1	
<i>levothyroxine sodium caps</i>	4	
LEVOTHYROXINE SODIUM INJ 100MCG/ML	5	
<i>levothyroxine sodium inj 100mcg/5ml, 100mcg, 200mcg/5ml, 200mcg, 500mcg/5ml, 500mcg</i>	5	
<i>levoxyl tabs 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg, 88mcg</i>	2	
LIOTHYRONINE SODIUM INJ	5	
<i>liothyronine sodium tabs</i>	2	
NIVA THYROID	4	
<i>np thyroid 120</i>	4	
<i>np thyroid 15</i>	4	
<i>np thyroid 30</i>	4	
<i>np thyroid 60</i>	4	
<i>np thyroid 90</i>	4	
RENTHYROID	4	
SYNTHROID TABS	3	
THYROID TABS 120MG, 15MG, 30MG, 60MG, 90MG	4	
<i>unithroid</i>	2	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
<i>cabergoline</i>	2	
ELIGARD	4	PA NSO
FIRMAGON INJ 80MG	4	
FIRMAGON INJ 120MG/VIAL	5	
LANREOTIDE ACETATE INJ 120MG/0.5ML	5	PA NSO
<i>lanreotide acetate inj 120mg/0.5ml</i>	5	PA NSO
LEUPROLIDE ACETATE INJ 22.5MG	4	PA NSO
<i>leuprolide acetate inj 1mg/0.2ml</i>	4	PA NSO
LUPRON DEPOT (1-MONTH)	5	PA NSO
LUPRON DEPOT (3-MONTH)	5	PA NSO
LUPRON DEPOT (4-MONTH)	5	PA NSO
LUPRON DEPOT (6-MONTH)	5	PA NSO
LUPRON DEPOT-PED (1-MONTH)	5	PA
LUPRON DEPOT-PED (3-MONTH)	5	PA
<i>mifepristone tabs 300mg</i>	5	PA
<i>octreotide acetate inj 100mcg/ml, 200mcg/ml, 50mcg/ml</i>	4	PA
<i>octreotide acetate inj 10mg</i>	5	PA
<i>octreotide acetate inj 1000mcg/ml, 20mg, 30mg, 500mcg/ml</i>	5	PA
ORGOVYX	5	PA NSO
SANDOSTATIN LAR DEPOT	5	PA
SIGNIFOR	5	PA
SIGNIFOR LAR	5	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
SOMATULINE DEPOT INJ 120MG/0.5ML	5	PA NSO
SOMATULINE DEPOT INJ 60MG/0.2ML, 90MG/0.3ML	5	PA
SOMAVERT	5	PA
SYNAREL	5	
TRELSTAR MIXJECT	4	PA NSO
ZOLADEX INJ 3.6MG	4	PA NSO
ZOLADEX INJ 10.8MG	5	PA NSO
Hormonal Agents, Suppressant (Thyroid)		
<i>Antithyroid Agents</i>		
<i>methimazole tabs 10mg, 5mg</i>	1	
<i>propylthiouracil tabs</i>	1	
Immunological Agents		
<i>Angioedema Agents</i>		
BERINERT	5	PA
CINRYZE	5	PA
HAEGARDA	5	PA
<i>icatibant acetate</i>	5	PA
KALBITOR	5	PA
ORLADEYO	5	PA
RUCONEST	5	PA
<i>sajazir</i>	5	PA
TAKHZYRO	5	PA
<i>Immunoglobulins</i>		
ALYGLO	5	B/D
ASCENIV	5	B/D
ATGAM	5	
BEYFORTUS	4	
BIVIGAM INJ 10%, 5GM/50ML	5	B/D
CUVITRU	5	PA
CYTOGAM INJ 50MG/ML	5	
FLEBOGAMMA DIF INJ 10GM/100ML, 10GM/200ML, 2.5GM/50ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	5	B/D
GAMASTAN	4	
GAMMAGARD LIQUID	5	B/D
GAMMAGARD S/D IGA LESS THAN 1MCG/ML	5	B/D
GAMMAKED INJ 10GM/100ML, 20GM/200ML, 5GM/50ML	5	B/D
GAMMAPLEX INJ 10GM/100ML, 10GM/200ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	5	B/D
GAMUNEX-C INJ 10GM/100ML, 2.5GM/25ML, 20GM/200ML, 40GM/400ML, 5GM/50ML	5	B/D
HEPAGAM B INJ 312UNIT/ML	5	B/D
HIZENTRA INJ 10GM/50ML	5	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
HIZENTRA INJ 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML	5	PA
HYPERRHEP B	5	B/D
HYPERRHO S/D MINI-DOSE	4	
HYPERRHO S/D INJ 1500UNIT	4	
HYQVIA	5	B/D
MICRHOGAM ULTRA-FILTERED PLUS	4	
NABI-HB INJ 312UNIT/ML	5	B/D
OCTAGAM INJ 10GM/100ML, 10GM/200ML, 1GM/20ML, 2.5GM/50ML, 20GM/200ML, 2GM/20ML, 30GM/300ML, 5GM/100ML, 5GM/50ML	5	B/D
PRIVIGEN	5	B/D
RHOGAM ULTRA-FILTERED PLUS	4	
RHOPHYLAC	4	
SYNAGIS INJ 100MG/ML, 50MG/0.5ML	5	PA
THYMOGLOBULIN	5	
VARIZIG INJ 125UNIT/1.2ML	5	
WINRHO SDF INJ 15000UNIT/13ML, 1500UNIT/1.3ML, 2500UNIT/2.2ML, 5000UNIT/4.4ML	5	
XEMBIFY	5	B/D
<i>Immunological Agents, Other</i>		
ACTEMRA	5	PA
ACTEMRA ACTPEN	5	PA
ARCALYST	5	PA
<i>auranofin</i>	5	
BENLYSTA INJ 200MG/ML	5	
COSENTYX	5	PA
COSENTYX SENSOREADY PEN	5	PA
COSENTYX UNOREADY	5	PA
DUPIXENT INJ 100MG/0.67ML	5	QL(1.34 ML per 28 days); PA
DUPIXENT INJ 200MG/1.14ML	5	QL(4.56 ML per 28 days); PA
DUPIXENT INJ 300MG/2ML	5	QL(8 ML per 28 days); PA
EMPAVELI	5	PA
ILARIS INJ 150MG/ML	5	PA
KINERET	5	PA
LEMTRADA	5	PA
ORENCIA CLICKJECT	5	PA
ORENCIA INJ 125MG/ML, 50MG/0.4ML, 87.5MG/0.7ML	5	PA
OTEZLA TBPK 0	5	PA
OTULFI INJ 45MG/0.5ML	4	PA
OTULFI INJ 130MG/26ML, 90MG/ML	5	PA
PYZCHIVA INJ 45MG/0.5ML	3	PA
PYZCHIVA INJ 130MG/26ML, 90MG/ML	5	PA
RAGWITEK	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
RIDAURA	5	
RINVOQ	5	PA
RINVOQ LQ	5	QL(360 ML per 30 days); PA
SELARSDI INJ 45MG/0.5ML	4	PA
SELARSDI INJ 90MG/ML	5	PA
SIMULECT	5	
SKYRIZI PEN	5	PA
SKYRIZI INJ 150MG/ML, 180MG/1.2ML, 360MG/2.4ML	5	PA
SOLIRIS	5	PA
STELARA INJ 45MG/0.5ML, 90MG/ML	5	PA
STEQEYMA INJ 130MG/26ML, 45MG/0.5ML	4	PA
STEQEYMA INJ 90MG/ML	5	PA
SYLVANT	5	PA
TALTZ	5	PA
TAVNEOS	5	QL(180 EA per 30 days); PA
TYENNE INJ 162MG/0.9ML	5	PA
TYENNE INJ 162MG/0.9ML, 200MG/10ML, 400MG/20ML, 80MG/4ML	5	PA
ULTOMIRIS INJ 1100MG/11ML, 300MG/3ML	5	PA
WEZLANA	5	PA
XELJANZ	5	PA
XELJANZ XR	5	PA
XOLAIR	5	PA
YESINTEK INJ 45MG/0.5ML	4	PA
YESINTEK INJ 130MG/26ML, 90MG/ML	5	PA
Immunostimulants		
ACTIMMUNE	5	
BESREMI	5	PA NSO
PEGASYS INJ 180MCG/ML	5	
Immunosuppressants		
ADALIMUMAB-ADAZ INJ 40MG/0.4ML	5	PA
ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS	5	PA
ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UVEITIS	5	PA
ADALIMUMAB-ADBM INJ 40MG/0.4ML	5	PA
AMJEVITA INJ 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML	5	PA
ASTAGRAF XL	4	B/D
AVSOLA	5	PA
AZATHIOPRINE INJ	5	B/D
<i>azathioprine tabs 50mg</i>	1	B/D
<i>azathioprine tabs 100mg, 75mg</i>	2	B/D
BENLYSTA INJ 120MG, 400MG	5	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
CIMZIA	5	PA
CIMZIA STARTER KIT	5	PA
cyclosporine modified	4	B/D
cyclosporine caps 100mg, 25mg	4	B/D
cyclosporine inj 50mg/ml	5	
ENBREL MINI	5	PA
ENBREL SURECLICK	5	PA
ENBREL INJ 25MG/0.5ML, 50MG/ML	5	PA
everolimus tabs 0.25mg, 0.5mg, 0.75mg, 1mg	5	B/D
gengraf caps 100mg, 25mg	4	B/D
gengraf soln	4	B/D
HADLIMA	5	PA
HADLIMA PUSHTOUCH	5	PA
INFLECTRA	5	PA
infliximab	5	PA
JYLLAMVO	5	
leflunomide	2	
LUPKYNIS	5	QL(180 EA per 30 days); PA
methotrexate sodium tabs	1	
methotrexate sodium inj 1gm/40ml, 1gm, 250mg/10ml, 50mg/2ml	1	
methotrexate inj 50mg/2ml	1	
MYCOPHENOLATE MOFETIL INJ	3	B/D
mycophenolate mofetil caps, tabs	2	B/D
mycophenolate mofetil susr	5	B/D
mycophenolic acid dr	2	B/D
NULOJIX	5	
ORENCIA INJ 250MG	5	PA
PEGASYS INJ 180MCG/0.5ML	5	
PROGRAF PACK	4	B/D
REMICADE	5	PA
RENFLEXIS	5	PA
REZUROCK	5	QL(60 EA per 30 days); PA
sirolimus tabs	4	B/D
sirolimus soln	5	B/D
tacrolimus caps 0.5mg, 1mg, 5mg	2	B/D
XATMEP	4	
Vaccines		
ABRYSVO	3	
ACTHIB INJ 0	3	
ADACEL	3	
AREXVY	3	
BCG VACCINE INJ 50MG	4	
BEXSERO	3	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
BOOSTRIX	3	
DAPTACEL INJ 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	3	
DENGVAXIA	4	
DIPHTHERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	4	
ENGERIX-B	3	B/D
GARDASIL 9	4	
HAVRIX INJ 1440ELU/ML, 720ELU/0.5ML	3	
HEPLISAV-B	3	B/D
HIBERIX	3	
IMOVAX RABIES (H.D.C.V.)	4	B/D
INFANRIX	3	
IPOP INACTIVATED IPV	4	
IXCHIQ	4	
IXIARO	4	
JYNNEOS	3	
KINRIX INJ 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
M-M-R II	4	
MENACTRA	3	
MENQUADFI	3	
MENVEO	3	
MRESVIA	3	
PEDIARIX INJ 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
PEDVAX HIB INJ 7.5MCG/0.5ML	3	
PENBRAYA	3	
PENTACEL	4	
PREHEVBRIOS	3	B/D
PRIORIX	4	
PROQUAD	3	
QUADRACEL	4	
RABAVERT	4	B/D
RECOMBIVAX HB	3	B/D
ROTARIX	4	
ROTATEQ SOLN	4	
SHINGRIX	3	
STAMARIL	4	
TDVAX	3	
TENIVAC	3	
TETANUS/DIPHTHERIA TOXOIDS-ADSORBED ADULT	3	
TICOVAC	3	
TRUMENBA	3	
TWINRIX	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
TYPHIM VI	4	
VAQTA	3	
VARIVAX	3	
VAXELIS	4	
VIMKUNYA	4	
VIVOTIF	4	QL(4 EA per 365 days)
YF-VAX	4	
Inflammatory Bowel Disease Agents		
<i>Aminosalicylates</i>		
<i>balsalazide disodium</i>	2	
<i>mesalamine dr</i>	4	
<i>mesalamine er cpcr</i>	4	
<i>mesalamine er cp24</i>	4	
<i>mesalamine enim, kit</i>	4	
<i>sulfasalazine tabs</i>	1	
<i>sulfasalazine tbec</i>	2	
<i>Glucocorticoids</i>		
<i>budesonide cpep 3mg</i>	4	
BUDESONIDE FOAM 2MG	3	
<i>hydrocortisone crea 1%, 2.5%</i>	1	
<i>hydrocortisone enim 100mg/60ml</i>	4	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
Metabolic Bone Disease Agents		
<i>Metabolic Bone Disease Agents</i>		
<i>alendronate sodium tabs 10mg, 35mg, 5mg, 70mg</i>	1	
<i>calcitonin salmon nasal soln</i>	2	
<i>calcitonin salmon inj</i>	5	
<i>calcitonin-salmon soln</i>	2	
<i>calcitriol caps 0.25mcg, 0.5mcg</i>	1	
CALCITRIOL INJ 1MCG/ML	1	
<i>calcitriol oral soln 1mcg/ml</i>	1	
<i>cinacalcet hydrochloride</i>	4	
<i>doxercalciferol inj</i>	2	PA
<i>doxercalciferol caps</i>	4	PA
FORTEO INJ 560MCG/2.24ML	5	PA
<i>ibandronate sodium tabs</i>	2	
MIACALCIN INJ	5	
<i>pamidronate disodium inj 30mg/10ml, 6mg/ml, 90mg/10ml</i>	1	
PARICALCITOL CAPS 1MCG, 2MCG	3	
PARICALCITOL CAPS 4MCG	4	
<i>paricalcitol inj</i>	4	
PROLIA	4	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>risedronate sodium</i>	2	
<i>risedronate sodium dr</i>	2	
TERIPARATIDE INJ 620MCG/2.48ML	5	PA
<i>teriparatide inj 560mcg/2.24ml</i>	5	PA
XGEVA	5	PA NSO
<i>zoledronic acid inj 4mg/100ml, 4mg/5ml, 5mg/100ml</i>	4	
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
ALCOHOL PREP PADS	3	
<i>atropine sulfate inj 0.25mg/5ml</i>	1	
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	3	
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	3	
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	3	
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	3	
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	3	
CLINOLIPID	3	B/D
COSELA	5	PA
CURITY ALL PURPOSE SPONGES 2"X2"	3	
CURITY GAUZE PADS 2"X2" 12 PLY	3	
<i>deferoxamine mesylate inj 2gm</i>	2	PA
<i>deferoxamine mesylate inj 500mg</i>	5	PA
DROPLET PEN NEEDLES 29GX10MM	3	
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	3	
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	3	
EASY COMFORT PEN NEEDLES 29GX4MM	3	
<i>fomepizole inj 1.5gm/1.5ml</i>	5	
GLOBAL ALCOHOL PREP EASE PADS	3	
INTRALIPID INJ 20GM/100ML, 30GM/100ML	3	B/D
<i>lactated ringers irrigation soln 3meq/l; 109meq/l; 28meq/l; 4meq/l; 130meq/l</i>	3	
<i>levocarnitine soln, tabs</i>	1	
<i>methergine tabs</i>	5	
<i>methylergonovine maleate inj</i>	1	
<i>methylergonovine maleate tabs</i>	5	
NUTRILIPID	3	B/D
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5)	4	PA
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5)	4	PA
OMNIPOD 5 G7 INTRO KIT (GEN 5)	4	PA
OMNIPOD 5 G7 PODS (GEN 5)	4	PA
OMNIPOD 5 LIBRE2 PLUS G6	4	PA
OMNIPOD 5 LIBRE2 PLUS G6 PODS	4	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
OMNIPOD CLASSIC PDM STARTER KIT (GEN 3)	4	PA
OMNIPOD CLASSIC PODS (GEN 3)	4	PA
OMNIPOD DASH INTRO KIT (GEN 4)	4	PA
OMNIPOD DASH PDM KIT (GEN 4)	4	PA
OMNIPOD DASH PODS (GEN 4)	4	PA
PROTOPAM CHLORIDE INJ	4	
<i>ringers irrigation soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l</i>	1	
<i>sodium chloride 0.9%</i>	2	
<i>sodium phenylacetate/sodium benzoate</i>	5	
<i>sterile water for irrigation</i>	1	
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	3	
<i>tis-u-sol</i>	1	
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	3	
VISTOGARD	5	
Ophthalmic Agents		
Ophthalmic Agents, Other		
<i>atropine sulfate soln 1%</i>	1	
<i>bacitracin/polymyxin b</i>	2	
<i>brimonidine tartrate/timolol maleate</i>	2	
<i>cyclopentolate hcl soln 1%</i>	1	
<i>cyclopentolate hydrochloride soln 1%</i>	1	
<i>cyclosporine emul 0.05%</i>	4	
CYSTADROPS	5	QL(20 ML per 28 days); PA
CYSTARAN	5	QL(60 ML per 28 days); PA
<i>dorzolamide hcl/timolol maleate</i>	1	
<i>dorzolamide hydrochloride/timolol maleate pf</i>	1	
<i>neo-polycin</i>	2	
<i>neo-polycin hc</i>	2	
<i>neomycin/bacitracin/polymyxin</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	2	
<i>neomycin/polymyxin/dexamethasone</i>	1	
<i>neomycin/polymyxin/gramicidin</i>	1	
<i>neomycin/polymyxin/hydrocortisone ophthalmic susp 1%; 3.5mg/ml; 10000unit/ml</i>	2	
OXERVATE	5	PA
<i>phenylephrine hydrochloride soln 10%</i>	1	
<i>polycin</i>	2	
<i>polymyxin b sulfate/trimethoprim sulfate</i>	1	
<i>proparacaine hcl</i>	1	
RESTASIS	4	
RESTASIS MULTIDOSE	4	
ROCKLATAN	4	
SIMBRINZA	3	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	1	
<i>tobramycin/dexamethasone</i>	2	
VABYSMO SOSY	5	
VABYSMO SOLN	5	
XIIDRA	3	
Ophthalmic Anti-allergy Agents		
ALOCRIL	4	
<i>azelastine hcl ophthalmic soln 0.05%</i>	2	
<i>cromolyn sodium soln 4%</i>	1	
<i>olopatadine hydrochloride soln 0.2%</i>	2	
Ophthalmic Anti-Infectives		
<i>bacitracin</i>	2	
<i>ciprofloxacin hydrochloride soln 0.3%</i>	1	
<i>erythromycin oint 5mg/gm</i>	1	
<i>gatifloxacin</i>	2	
<i>gentamicin sulfate ophthalmic soln 0.3%</i>	1	
<i>levofloxacin ophthalmic soln 0.5%</i>	2	
<i>moxifloxacin hydrochloride ophthalmic soln 0.5%</i>	2	
NATACYN	4	
<i>ofloxacin ophthalmic soln 0.3%</i>	1	
<i>sulfacetamide sodium oint 10%</i>	2	
<i>sulfacetamide sodium soln 10%</i>	1	
<i>tobramycin soln 0.3%</i>	1	
<i>trifluridine</i>	2	
XDEMVY	5	QL(10 ML per 42 days)
ZIRGAN	4	
Ophthalmic Anti-inflammatories		
<i>bromfenac</i>	4	
BROMFENAC SODIUM SOLN 0.075%	4	
<i>dexamethasone sodium phosphate ophthalmic soln 0.1%</i>	1	
<i>diclofenac sodium ophthalmic soln 0.1%</i>	2	
<i>fluorometholone</i>	2	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac tromethamine ophthalmic soln 0.5%</i>	1	
<i>loteprednol etabonate susp 0.5%</i>	4	
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate ophthalmic soln 1%</i>	1	
Ophthalmic Beta-Adrenergic Blocking Agents		
<i>betaxolol hcl soln 0.5%</i>	1	
<i>carteolol hcl</i>	1	
<i>levobunolol hcl soln 0.5%</i>	1	
<i>timolol maleate ophthalmic gel forming solg 0.25%</i>	2	
<i>timolol maleate ophthalmic gel forming solg 0.5%</i>	4	
<i>timolol maleate soln 0.25%, 0.5%</i>	1	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>timolol maleate soln 0.5%</i>	2	; Once Daily
Ophthalmic Intraocular Pressure Lowering Agents, Other		
<i>acetazolamide</i>	2	
<i>acetazolamide er</i>	2	
<i>apraclonidine</i>	1	
<i>brimonidine tartrate soln 0.15%, 0.2%</i>	2	
<i>dorzolamide hydrochloride</i>	1	
<i>methazolamide tabs</i>	4	
<i>pilocarpine hcl soln 1%, 2%, 4%</i>	2	
<i>pilocarpine hydrochloride soln 1%, 2%, 4%</i>	2	
RHOPRESSA	4	
Ophthalmic Prostaglandin and Prostamide Analogs		
<i>latanoprost soln</i>	1	
LUMIGAN	3	
<i>tafluprost</i>	4	
<i>travoprost</i>	2	
VYZULTA	4	
Otic Agents		
Otic Agents		
<i>acetic acid</i>	2	
<i>flac</i>	2	
<i>fluocinolone acetonide ear drops</i>	2	
<i>fluocinolone acetonide oil 0.01%</i>	2	
<i>neomycin/polymyxin/hc</i>	2	
<i>neomycin/polymyxin/hydrocortisone soln 1%; 3.5mg/ml; 10000unit/ml</i>	2	
<i>neomycin/polymyxin/hydrocortisone otic susp 1%; 3.5mg/ml; 10000unit/ml</i>	2	
<i>ofloxacin otic soln 0.3%</i>	1	
Respiratory Tract/Pulmonary Agents		
Anti-inflammatories, Inhaled Corticosteroids		
ARNUITY ELLIPTA	3	
<i>budesonide susp 0.25mg/2ml, 0.5mg/2ml, 1mg/2ml</i>	2	B/D
<i>flunisolide soln 0.025%</i>	1	
<i>fluticasone propionate susp 50mcg/act</i>	2	
QVAR REDIHALER	3	
Antihistamines		
<i>azelastine hcl nasal soln 0.15%</i>	2	
<i>azelastine hydrochloride soln 0.1%</i>	2	
<i>cetirizine hydrochloride soln 5mg/5ml</i>	2	
<i>ciproheptadine hcl syrup</i>	2	
<i>ciproheptadine hydrochloride tabs</i>	2	
<i>desloratadine</i>	2	
<i>diphenhydramine hcl elix</i>	2	PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
diphenhydramine hydrochloride inj	2	
hydroxyzine hcl tabs 50mg	4	PA
hydroxyzine hydrochloride tabs 10mg, 25mg	4	PA
hydroxyzine pamoate caps	4	PA
levocetirizine dihydrochloride tabs	2	
Antileukotrienes		
montelukast sodium chew, pack, tabs	1	
zafirlukast	2	
Bronchodilators, Anticholinergic		
ATROVENT HFA	3	
ipratropium bromide inhalation soln	1	B/D
ipratropium bromide nasal soln	1	
SPIRIVA RESPIMAT	3	
tiotropium bromide	4	
TUDORZA PRESSAIR	3	
Bronchodilators, Sympathomimetic		
albuterol sulfate hfa aers 108mcg/act	1	
albuterol sulfate hfa aers 108mcg/act	2	
albuterol sulfate syrup	1	
albuterol sulfate nebu	2	B/D
albuterol sulfate tabs	2	
arformoterol tartrate	4	B/D
epinephrine inj 0.15mg/0.15ml, 0.15mg/0.3ml, 0.3mg/0.3ml	2	
isoproterenol hydrochloride	2	
levalbuterol hcl nebu 0.63mg/3ml	4	B/D
levalbuterol hydrochloride nebu 0.63mg/3ml	4	B/D
levalbuterol tartrate hfa	2	
PROAIR DIGIHALER	3	
PROAIR RESPICLICK	3	
SEREVENT DISKUS	3	
terbutaline sulfate tabs	2	
terbutaline sulfate inj	5	
ventolin hfa	2	
Cystic Fibrosis Agents		
CAYSTON	5	PA
KALYDECO	5	PA
ORKAMBI	5	PA
PULMOZYME	5	PA
SYMDEKO	5	PA
TOBI PODHALER	5	PA
tobramycin nebu 300mg/5ml	5	PA
TRIKAFTA THPK	5	PA
TRIKAFTA TBPK 100MG; 0; 50MG	5	PA
Mast Cell Stabilizers		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>cromolyn sodium nebu 20mg/2ml</i>	3	B/D
<i>Phosphodiesterase Inhibitors, Airways Disease</i>		
<i>aminophylline inj</i>	1	
<i>elizophyllin</i>	1	
<i>roflumilast</i>	4	ST
<i>theophylline</i>	1	
<i>theophylline er tb24</i>	2	
<i>theophylline er tb12 300mg, 450mg</i>	2	
<i>Pulmonary Antihypertensives</i>		
<i>ADEMPAS</i>	5	PA
<i>alyq</i>	4	PA
<i>ambrisentan</i>	5	PA
<i>epoprostenol sodium</i>	5	PA
<i>OPSUMIT</i>	5	PA
<i>ORENITRAM TITRATION KIT MONTH 1</i>	5	QL(336 EA per 365 days); PA
<i>ORENITRAM TITRATION KIT MONTH 2</i>	5	QL(672 EA per 365 days); PA
<i>ORENITRAM TITRATION KIT MONTH 3</i>	5	QL(504 EA per 365 days); PA
<i>ORENITRAM TBCR 0.125MG</i>	3	PA
<i>ORENITRAM TBCR 0.25MG, 1MG, 2.5MG, 5MG</i>	5	PA
<i>REMODULIN</i>	5	PA
<i>SILDENAFIL CITRATE TABS</i>	3	PA
<i>sildenafil inj</i>	5	PA
<i>tadalafil tabs 20mg</i>	4	PA
<i>treprostinil</i>	5	PA
<i>TYVASO</i>	5	PA
<i>TYVASO DPI INSTITUTIONAL KIT</i>	5	PA
<i>TYVASO DPI MAINTENANCE KIT</i>	5	PA
<i>TYVASO DPI TITRATION KIT</i>	5	PA
<i>TYVASO REFILL KIT</i>	5	PA
<i>TYVASO STARTER KIT</i>	5	PA
<i>UPTRAVI</i>	5	QL(60 EA per 30 days); PA
<i>UPTRAVI TITRATION PACK</i>	5	QL(400 EA per 365 days); PA
<i>VENTAVIS</i>	5	PA
<i>Pulmonary Fibrosis Agents</i>		
<i>OFEV</i>	5	QL(60 EA per 30 days); PA
<i>pirfenidone caps</i>	5	PA
<i>PIRFENIDONE TABS 534MG</i>	5	PA
<i>pirfenidone tabs 267mg, 801mg</i>	5	PA
<i>Respiratory Tract Agents, Other</i>		
<i>acetylcysteine inhalation soln</i>	2	B/D
<i>acetylcysteine inj</i>	2	
<i>ANORO ELLIPTA</i>	3	
<i>BEVESPI AEROSPHERE</i>	4	
<i>BREO ELLIPTA</i>	3	

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
breyna	4	QL(10.3 GM per 30 days)
BREZTRI AEROSPHERE	3	
BRONCHITOL	5	QL(560 EA per 28 days); PA
COMBIVENT RESPIMAT	3	
DULERA	3	
<i>fluticasone propionate/salmeterol diskus</i>	2	
<i>fluticasone propionate/salmeterol aepb 113mcg/act; 14mcg/act, 232mcg/act; 14mcg/act, 500mcg/act; 50mcg/act, 55mcg/act; 14mcg/act</i>	2	
<i>ipratropium bromide/albuterol sulfate</i>	1	B/D
NUCALA VIAL; PREFILLED SYRINGE	5	PA
<i>ribavirin solr 6gm</i>	5	PA
STIOLTO RESPIMAT	3	
TEZSPIRE	5	QL(1.91 ML per 28 days); PA
TRELEGY ELLIPTA	3	
<i>wixela inhub</i>	2	
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>cyclobenzaprine hydrochloride tabs 10mg, 5mg</i>	2	PA
<i>methocarbamol tabs 500mg, 750mg</i>	2	
Sleep Disorder Agents		
Sleep Promoting Agents		
BELSOMRA	3	
DAYVIGO	3	
<i>doxepin hydrochloride tabs 3mg, 6mg</i>	2	
<i>flurazepam hydrochloride</i>	2	QL(30 EA per 30 days)
HETLIOZ LQ	5	PA
<i>pentobarbital sodium</i>	4	
<i>ramelteon</i>	4	QL(30 EA per 30 days)
<i>tasimelteon</i>	5	PA
<i>temazepam</i>	2	QL(30 EA per 30 days)
<i>triazolam</i>	2	QL(30 EA per 30 days)
<i>zolpidem tartrate tabs</i>	2	
Wakefulness Promoting Agents		
<i>armodafinil</i>	2	PA
MODAFINIL TABS	3	PA
SODIUM OXYBATE	5	PA
SUNOSI	4	QL(30 EA per 30 days); PA

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Index of Drugs

Drug Name	Page #	Drug Name	Page #
<i>abacavir</i>	29	<i>adefovir dipivoxil</i>	28
<i>abacavir sulfate</i>	29	<i>ADEMPAS</i>	72
<i>abacavir sulfate/lamivudine</i>	29	<i>adriamycin</i>	18
<i>ABELCET</i>	13	<i>ADSTILADRIN</i>	18
<i>ABILIFY MAINTENA</i>	26	<i>ADTHYZA</i>	59
ABILIFY MYCITE MAINTENANCE KIT	26	<i>afirmelle</i>	54
ABILIFY MYCITE STARTER KIT	26	<i>AIMOVIG</i>	14
<i>abiraterone acetate</i>	16	<i>AKEEGA</i>	18
<i>abirtega</i>	16	<i>ala-cort</i>	43
<i>ABRAXANE</i>	18	<i>albendazole</i>	24
<i>ABRYSVO</i>	64	<i>albuterol sulfate</i>	71
<i>acamprosate calcium dr</i>	3	<i>albuterol sulfate hfa</i>	71
<i>acarbose</i>	31	<i>alclometasone dipropionate</i>	43
<i>accutane</i>	43	<i>ALCOHOL PREP PADS</i>	67
<i>acebutolol hydrochloride</i>	37	<i>ALDURAZYME</i>	51
<i>acetaminophen/codeine</i>	2	<i>ALECENSA</i>	20
<i>acetaminophen/codeine phosphate</i>	2	<i>alendronate sodium</i>	66
<i>acetazolamide</i>	70	<i>alfuzosin hcl er</i>	53
<i>acetazolamide er</i>	70	<i>ALIMTA</i>	17
<i>acetazolamide sodium</i>	38	<i>ALIQOPA</i>	20
<i>acetic acid</i>	70	<i>aliskiren</i>	38
<i>acetic acid 0.25%</i>	53	<i>allopurinol</i>	14
<i>acetylcysteine</i>	72	<i>ALOCRIL</i>	69
<i>acitretin</i>	43	<i>ALOGLIPTIN</i>	31
<i>ACTEMRA</i>	62	ALOGLIPTIN/METFORMIN HCL	31
ACTEMRA ACTPEN	62	ALOGLIPTIN/METFORMIN HYDROCHLORIDE	31
<i>ACTHIB</i>	64	ALOGLIPTIN/PIOGLITAZONE	31
<i>ACTIMMUNE</i>	63	<i>alosetron hydrochloride</i>	50
<i>acyclovir</i>	30	<i>alprazolam</i>	31
<i>acyclovir</i>	45	<i>alprazolam er</i>	31
<i>acyclovir sodium</i>	30	<i>alprazolam odt</i>	31
<i>ADACEL</i>	64	<i>alprazolam xr</i>	31
<i>ADALIMUMAB-ADAZ</i>	63	<i>altavera</i>	54
<i>ADALIMUMAB-ADBM</i>	63	<i>ALUNBRIG</i>	20
ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS	63	<i>alyacen 1/35</i>	54
ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UVEITIS	63	<i>alyacen 7/7/7</i>	54
<i>adapalene</i>	43	<i>ALYGLO</i>	61
<i>ADBRY</i>	43	<i>ALYMSYS</i>	23
<i>ADCETRIS</i>	23	<i>alyq</i>	72
		<i>amabelz</i>	54
		<i>amantadine hcl</i>	30
		<i>ambrisentan</i>	72
		<i>amcinonide</i>	43
		<i>amethyst</i>	54

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>amikacin sulfate</i>	4	ARCALYST	62
<i>amiloride hcl</i>	39	AREXVY	64
<i>amiloride/hydrochlorothiazide</i>	38	<i>arformoterol tartrate</i>	71
<i>aminocaproic acid</i>	35	ARIKAYCE	4
<i>aminophylline</i>	72	<i>ariPIPRAZOLE</i>	26
AMINOSYN II	46	<i>ariPIPRAZOLE odt</i>	26
AMINOSYN-PF	46	ARISTADA	26
AMINOSYN-PF 7%	46	ARISTADA INITIO	26
<i>amiodarone hydrochloride</i>	36	<i>armodafinil</i>	73
<i>amitriptyline hcl</i>	12	ARMOUR THYROID	59
<i>amitriptyline hydrochloride</i>	12	ARNUTITY ELLIPTA	70
AMJEVITA	63	ARRANON	17
<i>amlodipine besylate</i>	37	<i>arsenic trioxide</i>	18
<i>amlodipine besylate/benazepril hcl</i>	38	ARZERRA	23
<i>amlodipine besylate/benazepril hydrochloride</i>	38	ASCENIV	61
<i>amlodipine besylate/valsartan ammonium lactate</i>	38	<i>ascomp/codeine</i>	2
<i>amnesteem</i>	43	ASENAPINE MALEATE SL	26
<i>amoxapine</i>	12	<i>ashlyna</i>	54
<i>amoxicillin</i>	6	<i>aspirin/dipyridamole</i>	35
<i>amoxicillin/clavulanate potassium</i>	6	<i>aspirin/dipyridamole er</i>	35
<i>amoxicillin/clavulanate potassium er</i>	6	ASTAGRAF XL	63
<i>amphetamine/dextroamphetamine amphotericin b</i>	41	<i>atazanavir</i>	30
<i>amphotericin b liposome</i>	13	<i>atazanavir sulfate</i>	30
<i>ampicillin</i>	6	<i>atenolol</i>	37
<i>ampicillin sodium</i>	6	<i>atenolol/chlorthalidone</i>	38
<i>ampicillin/sulbactam</i>	6	ATGAM	61
<i>ampicillin-sulbactam</i>	6	<i>atomoxetine</i>	41
<i>anagrelide hydrochloride</i>	34	<i>atomoxetine hydrochloride</i>	41
<i>anastrozole</i>	19	<i>atorvastatin calcium</i>	40
ANKTIVA	18	<i>atovaquone</i>	24
ANNOVERA	54	<i>atovaquone/proguanil hcl</i>	24
ANORO ELLIPTA	72	<i>atovaquone/proguanil hydrochloride</i>	24
<i>apomorphine hydrochloride</i>	25	<i>atropine sulfate</i>	67
APONVIE	13	<i>atropine sulfate</i>	68
<i>apraclonidine</i>	70	ATROVENT HFA	71
<i>aprepitant</i>	13	<i>aubra eq</i>	55
<i>apri</i>	54	AUGMENTIN	6
APTIOM	10	AUGTYRO	20
APTIVUS	29	<i>auranofin</i>	62
ARALAST NP	51	<i>aurovela 1.5/30</i>	55
<i>aranelle</i>	54	<i>aurovela 1/20</i>	55
ARANESP ALBUMIN FREE	34	<i>aurovela 24 fe</i>	55
		<i>aurovela fe 1.5/30</i>	55
		<i>aurovela fe 1/20</i>	55
		AUVELITY	11

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
AVASTIN	23	<i>bendamustine hydrochloride</i>	15
<i>aviane</i>	55	BENDEKA	15
AVMAPKI FAKZYNJA CO-PACK	20	BENLYSTA	62
AVONEX	42	BENLYSTA	63
AVONEX PEN	42	<i>benztropine mesylate</i>	25
AVSOLA	63	BERINERT	61
AVYCAZ	5	BESPONSA	23
AXTLE	17	BESREMI	63
<i>ayuna</i>	55	<i>betaine anhydrous</i>	51
AYVAKIT	20	<i>betamethasone dipropionate</i>	44
<i>azacitidine</i>	18	<i>betamethasone dipropionate augmented</i>	43
AZATHIOPRINE	63	<i>betamethasone sodium</i>	53
<i>azelaic acid</i>	43	<i>phosphate/betamethasone acetate</i>	
<i>azelastine hcl</i>	69	<i>betamethasone valerate</i>	44
<i>azelastine hcl</i>	70	BETASERON	42
<i>azelastine hydrochloride</i>	70	<i>betaxolol hcl</i>	37
AZELEX	43	<i>betaxolol hcl</i>	69
azithromycin	7	<i>bethanechol chloride</i>	53
aztreonam	4	BEVESPI AEROSPHERE	72
<i>azurette</i>	55	<i>bexarotene</i>	24
bacitracin	69	BEXZERO	64
<i>bacitracin/polymyxin b</i>	68	BEYFORTUS	61
<i>baclofen</i>	27	<i>bicalutamide</i>	16
<i>balsalazide disodium</i>	66	BICILLIN C-R	6
BALVERSA	20	BICILLIN L-A	6
<i>balziva</i>	55	BIKTARVY	28
BARACLUDE	28	<i>bisoprolol fumarate</i>	37
BAVENCIO	23	<i>bisoprolol fumarate/hydrochlorothiazide</i>	38
BAXDELA	7	BIVIGAM	61
BCG VACCINE	64	BIZENGRI	23
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	67	<i>bleomycin sulfate</i>	18
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	67	BLINCYTO	23
BD INSULIN SYRINGE ULTRA- FINE/0.5ML/30G X 12.7MM	67	<i>blisovi 24 fe</i>	55
BD INSULIN SYRINGE ULTRA- FINE/1ML/31G X 8MM	67	<i>blisovi fe 1.5/30</i>	55
BD PEN NEEDLE/ORIGINAL/ULTRA- FINE/29G X 12.7MM	67	<i>blisovi fe 1/20</i>	55
BELEODAQ	20	BOOSTRIX	65
BELSOMRA	73	BORTEZOMIB	18
<i>benazepril hydrochloride</i>	36	BOSULIF	20
<i>benazepril</i>	38	BOTOX	27
<i>hydrochloride/hydrochlorothiazide</i>		BRAFTOVI	20
		BREO ELLIPTA	72
		<i>breyna</i>	73
		BREZTRI AEROSPHERE	73
		<i>brielllyn</i>	55
		BRILINTA	35

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>brimonidine tartrate</i>	70	<i>candesartan cilexetil/hydrochlorothiazide</i>	38
<i>brimonidine tartrate/timolol maleate</i>	68	CAPLYTA	26
BRIVIACT	8	CAPRELSA	20
<i>bromfenac</i>	69	<i>captopril</i>	36
BROMFENAC SODIUM	69	<i>carbamazepine</i>	10
<i>bromocriptine mesylate</i>	25	<i>carbamazepine er</i>	10
BRONCHITOL	73	<i>carbidopa</i>	25
BRUKINSA	20	<i>carbidopa/levodopa</i>	25
<i>budesonide</i>	66	<i>carbidopa/levodopa er</i>	25
<i>budesonide</i>	70	<i>carbidopa/levodopa odt</i>	25
<i>bumetanide</i>	39	<i>carbidopa/levodopa/entacapone</i>	25
<i>buprenorphine</i>	1	<i>carboplatin</i>	15
<i>buprenorphine hcl</i>	3	<i>carglumic acid</i>	46
<i>buprenorphine hcl/naloxone hcl</i>	3	CARMUSTINE	15
<i>buprenorphine hydrochloride/naloxone hydrochloride</i>	3	<i>carteolol hcl</i>	69
<i>bupropion hydrochloride</i>	11	<i>cartia xt</i>	38
<i>bupropion hydrochloride er (sr)</i>	4	<i>carvedilol</i>	37
<i>bupropion hydrochloride er (sr)</i>	11	<i>carvedilol phosphate er</i>	37
<i>bupropion hydrochloride er (xl)</i>	11	<i>caspofungin acetate</i>	13
<i>buspirone hcl</i>	30	CAYSTON	71
<i>buspirone hydrochloride</i>	30	<i>cefaclor</i>	5
<i>busulfan</i>	15	<i>cefaclor er</i>	5
BUSULFEX	15	<i>cefadroxil</i>	5
<i>butalbital/acetaminophen/caffeine</i>	41	CEFAZOLIN	6
<i>butalbital/acetaminophen/caffeine/codeine</i>	2	<i>cefazolin sodium</i>	6
<i>butalbital/aspirin/caffeine</i>	41	<i>cefazolin sodium/dextrose</i>	5
<i>butalbital/aspirin/caffeine/codeine</i>	2	CEFAZOLIN/DEXTROSE	6
<i>butorphanol tartrate</i>	2	<i>cefdinir</i>	6
CABENUVA	28	CEFEPIME	6
<i>cabergoline</i>	60	CEFEPIME HYDROCHLORIDE	6
CABLIVI	35	CEFEPIME/DEXTROSE	6
CABOMETYX	20	<i>cefixime</i>	6
<i>caffeine citrate</i>	42	CEFOTAXIME SODIUM	6
<i>calcipotriene</i>	44	<i>cefotetan</i>	6
<i>calcitonin salmon</i>	66	<i>cefoxitin sodium</i>	6
<i>calcitonin-salmon</i>	66	<i>cefpodoxime proxetil</i>	6
<i>calcitriol</i>	44	<i>cefprozil</i>	6
<i>calcitriol</i>	66	<i>ceftazidime</i>	6
<i>calcium acetate</i>	49	<i>ceftriaxone in iso-osmotic dextrose</i>	6
CALQUENCE	20	<i>ceftriaxone sodium</i>	6
<i>camila</i>	59	<i>ceftriaxone/dextrose</i>	6
<i>camrese</i>	55	<i>cefuroxime axetil</i>	6
<i>camrese lo</i>	55	<i>cefuroxime sodium</i>	6
<i>candesartan cilexetil</i>	35	<i>celecoxib</i>	1
		<i>cephalexin</i>	6

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
CERDELGA	51	clindamycin hcl	4
CEREZYME	51	clindamycin hydrochloride	4
<i>cetirizine hydrochloride</i>	70	clindamycin palmitate hydrochloride	4
<i>cevimeline hydrochloride</i>	43	clindamycin phosphate	4
<i>charlotte 24 fe</i>	55	clindamycin phosphate	45
<i>chateal eq</i>	55	clindamycin phosphate/dextrose	4
CHEMET	48	CLINIMIX 4.25%/DEXTROSE 10%	46
<i>chloramphenicol sodium succinate</i>	4	CLINIMIX 4.25%/DEXTROSE 5%	46
<i>chlordiazepoxide hcl</i>	31	CLINIMIX 5%/DEXTROSE 15%	46
<i>chlordiazepoxide hydrochloride</i>	31	CLINIMIX 5%/DEXTROSE 20%	46
<i>chlorhexidine gluconate</i>	43	CLINIMIX 6/5	46
<i>chloroquine phosphate</i>	25	CLINIMIX 8/10	46
<i>chlorothiazide sodium</i>	39	CLINIMIX 8/14	46
<i>chlorpromazine hcl</i>	25	CLINIMIX E 2.75%/DEXTROSE 5%	46
<i>chlorpromazine hydrochloride</i>	25	CLINIMIX E 4.25%/DEXTROSE 10%	46
<i>chlorthalidone</i>	39	CLINIMIX E 4.25%/DEXTROSE 5%	46
CHOLBAM	51	CLINIMIX E 5%/DEXTROSE 15%	46
<i>cholestyramine</i>	40	CLINIMIX E 5%/DEXTROSE 20%	46
<i>cholestyramine light</i>	40	CLINIMIX E 8/10	46
<i>chorionic gonadotropin</i>	54	CLINIMIX E 8/14	46
<i>ciclodan</i>	45	CLINISOL SF 15%	46
<i>ciclopirox</i>	45	CLINOLIPID	67
<i>ciclopirox nail lacquer</i>	45	<i>clobazam</i>	9
<i>ciclopirox olamine</i>	45	<i>clobetasol propionate</i>	44
<i>cidofovir</i>	27	<i>clobetasol propionate e</i>	44
<i>cilostazol</i>	35	<i>clobetasol propionate emollient</i>	44
CIMDUO	29	<i>clofarabine</i>	17
<i>cimetidine</i>	50	<i>clomipramine hydrochloride</i>	12
CIMZIA	64	<i>clonazepam</i>	9
CIMZIA STARTER KIT	64	<i>clonazepam odt</i>	9
<i>cinacalcet hydrochloride</i>	66	<i>clonidine</i>	35
CINRYZE	61	<i>clonidine hydrochloride</i>	35
CINVANTI	13	<i>clonidine hydrochloride er</i>	41
<i>ciprofloxacin hcl</i>	7	<i>clopidogrel</i>	35
<i>ciprofloxacin hydrochloride</i>	7	<i>clorazepate dipotassium</i>	31
<i>ciprofloxacin hydrochloride</i>	69	<i>clotrimazole</i>	13
<i>ciprofloxacin i.v.-in d5w</i>	7	<i>clotrimazole/betamethasone dipropionate</i>	45
<i>cisplatin</i>	15	<i>clozapine</i>	27
<i>citalopram hydrobromide</i>	11	<i>clozapine odt</i>	27
<i>cladribine</i>	17	COARTEM	25
<i>claravis</i>	43	COBENFY	42
<i>clarithromycin</i>	7	COBENFY STARTER PACK	42
<i>clarithromycin er</i>	7	CODEINE SULFATE	2
<i>clindacin</i>	45	<i>colchicine</i>	14
<i>clindacin etz pledges</i>	4		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>colesevelam hydrochloride</i>	40	<i>cytarabine</i>	17
<i>colestipol hydrochloride</i>	40	<i>cytarabine aqueous</i>	17
<i>colistimethate sodium</i>	5	CYTOGAM	61
COLUMVI	18	<i>dabigatran etexilate</i>	33
COMBIVENT RESPIMAT	73	<i>dacarbazine</i>	16
COMETRIQ	20	<i>dactinomycin</i>	18
COMPLERA	28	<i>dalfampridine er</i>	42
<i>compro</i>	13	<i>danazol</i>	54
<i>constulose</i>	49	<i>dantrolene sodium</i>	27
COPIKTRA	20	DANYELZA	23
CORLANOR	38	DANZITEN	20
COSELA	67	<i>dapsone</i>	15
COSENTYX	62	DAPTACEL	65
COSENTYX SENSOREADY PEN	62	<i>daptomycin</i>	5
COSENTYX UNOREADY	62	DAPTOMYCIN/SODIUM CHLORIDE	5
COTELLIC	20	DARIFENACIN HYDROBROMIDE ER	52
CREON	51	<i>darunavir</i>	30
CRESEMBIA	13	DARZALEX	23
CRINONE	59	DARZALEX FASPRO	23
<i>cromolyn sodium</i>	51	<i>dasatinib</i>	20
<i>cromolyn sodium</i>	69	<i>dasetta 1/35</i>	55
<i>cromolyn sodium</i>	72	<i>dasetta 7/7/7</i>	55
<i>cryselle-28</i>	55	DATROWAY	23
CRYSVITA	51	<i>daunorubicin hydrochloride</i>	18
CURITY ALL PURPOSE SPONGES	67	DAURISMO	20
2"X2"		<i>daysee</i>	55
CURITY GAUZE PADS 2"X2" 12 PLY	67	DAYVIGO	73
CUVITRU	61	<i>deblitane</i>	59
<i>cyclobenzaprine hydrochloride</i>	73	<i>decitabine</i>	18
<i>cyclopentolate hcl</i>	68	<i>deferasirox</i>	49
<i>cyclopentolate hydrochloride</i>	68	<i>deferiprone</i>	49
CYCLOPHOSPHAMIDE	16	<i>deferoxamine mesylate</i>	67
CYCLOPHOSPHAMIDE	16	DELSTRIGO	28
MONOHYDRATE		<i>delyla</i>	55
CYCLOSERINE	15	<i>demeclercycline hcl</i>	8
<i>cyclosporine</i>	64	<i>demeclercycline hydrochloride</i>	8
<i>cyclosporine</i>	68	DENGVAXIA	65
<i>cyclosporine modified</i>	64	DEPO-ESTRADIOL	55
<i>cyproheptadine hcl</i>	70	DEPO-SUBQ PROVERA 104	59
<i>cyproheptadine hydrochloride</i>	70	DESCOVY	29
CYRAMZA	23	<i>desipramine hydrochloride</i>	12
<i>cyred eq</i>	55	<i>desloratadine</i>	70
CYSTADROPS	68	<i>desmopressin acetate</i>	54
CYSTAGON	51	<i>desogestrel/ethinyl estradiol</i>	55
CYSTARAN	68	<i>desonide</i>	44

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>desoximetasone</i>	44	<i>dicyclomine hcl</i>	50
<i>desvenlafaxine er</i>	11	<i>dicyclomine hydrochloride</i>	50
<i>dexamethasone</i>	53	<i>DIFICID</i>	7
DEXAMETHASONE INTENSOL	53	DIGOXIN	36
<i>dexamethasone sodium phosphate</i>	53	<i>dihydroergotamine mesylate</i>	14
<i>dexamethasone sodium phosphate</i>	69	DILANTIN	10
DEXAMETHASONE SODIUM PHOSPHATE +RFID	53	DILANTIN INFATABS	10
<i>dexamethylphenidate hcl</i>	41	<i>diltiazem hcl</i>	38
<i>dexamethylphenidate hcl er</i>	41	<i>diltiazem hcl cd</i>	38
<i>dexamethylphenidate hydrochloride</i>	41	<i>diltiazem hcl er</i>	38
<i>dexamethylphenidate hydrochloride er</i>	41	<i>diltiazem hydrochloride</i>	38
<i>dexrazoxane</i>	24	<i>diltiazem hydrochloride er</i>	38
<i>dexrazoxane hydrochloride</i>	24	<i>dilt-xr</i>	38
<i>dextroamphetamine sulfate</i>	41	<i>dimenhydrinate</i>	13
<i>dextroamphetamine sulfate er</i>	41	<i>dimethyl fumarate</i>	42
<i>dextrose</i>	47	<i>dimethyl fumarate starterpack</i>	42
<i>dextrose 5%/electrolyte #48 viaflex</i>	46	<i>diphenhydramine hcl</i>	70
<i>dextrose 10%</i>	46	<i>diphenhydramine hydrochloride</i>	71
<i>dextrose 10%/sodium chloride 0.2%</i>	47	<i>diphenoxylate hydrochloride/atropine sulfate</i>	50
<i>dextrose 10%/sodium chloride 0.45%</i>	47	<i>diphenoxylate/atropine sulfate</i>	50
<i>dextrose 2.5%/sodium chloride 0.45%</i>	47	DIPHTHERIA/TETANUS TOXOIDS	65
<i>dextrose 25%</i>	47	ADSORBED PEDIATRIC	
<i>dextrose 5%</i>	47	<i>disulfiram</i>	3
<i>dextrose 5%/lactated ringers</i>	47	<i>DIURIL</i>	39
<i>dextrose 5%/sodium chloride 0.2%</i>	47	<i>divalproex sodium dr</i>	9
<i>dextrose 5%/sodium chloride 0.3%</i>	47	<i>divalproex sodium er</i>	9
<i>dextrose 5%/sodium chloride 0.33%</i>	47	<i>dobutamine hcl</i>	38
<i>dextrose 5%/sodium chloride 0.45%</i>	47	<i>dobutamine hcl/d5w</i>	38
<i>dextrose 5%/sodium chloride 0.9%</i>	47	<i>dobutamine hydrochloride/dextrose 5%</i>	38
<i>dextrose 50%</i>	47	<i>DOCETAXEL</i>	18
<i>dextrose/sodium chloride</i>	47	<i>dofetilide</i>	36
DIACOMIT	9	<i>dolishale</i>	55
<i>diazepam</i>	31	<i>donepezil hcl</i>	11
<i>diazepam intensol</i>	31	<i>donepezil hydrochloride</i>	11
<i>diazepam rectal gel</i>	9	<i>donepezil hydrochloride odt</i>	11
<i>diazoxide</i>	32	<i>dopamine hydrochloride</i>	38
<i>dichlorphenamide</i>	51	<i>dopamine hydrochloride/dextrose</i>	39
<i>diclofenac sodium</i>	1	<i>dopamine/d5w</i>	39
<i>diclofenac sodium</i>	45	DOPTELET	35
<i>diclofenac sodium</i>	69	<i>dorzolamide hcl/timolol maleate</i>	68
<i>diclofenac sodium dr</i>	1	<i>dorzolamide hydrochloride</i>	70
<i>diclofenac sodium er</i>	1	<i>dorzolamide hydrochloride/timolol maleate</i>	68
<i>diclofenac sodium/misoprostol</i>	1	<i>pf dotti</i>	
<i>dicloxacillin sodium</i>	6		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
DOVATO	28	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	28
<i>doxazosin</i>	53	ELAHERE	23
<i>doxazosin mesylate</i>	53	ELAPRASE	51
<i>doxepin hcl</i>	12	ELELYSO	51
<i>doxepin hydrochloride</i>	12	ELEPSIA XR	8
DOXEPIN HYDROCHLORIDE	44	ELIGARD	60
<i>doxepin hydrochloride</i>	73	ELIQUIS	33
<i>doxercalciferol</i>	66	ELIQUIS STARTER PACK	33
<i>doxorubicin hcl</i>	18	ELITEK	24
<i>doxorubicin hydrochloride</i>	18	<i>elixophyllin</i>	72
<i>doxorubicin hydrochloride liposomal</i>	18	ELMIRON	53
<i>doxy 100</i>	8	ELREXFIO	18
<i>doxycycline</i>	8	<i>eltrombopag olamine</i>	34
<i>doxycycline hyclate</i>	8	<i>eluryng</i>	55
<i>doxycycline monohydrate</i>	43	ELZONRIS	18
DRIZALMA SPRINKLE	11	EMCYT	17
<i>dronabinol</i>	13	EMEND	13
<i>droperidol</i>	13	EMGALITY	14
DROPLET PEN NEEDLES 29GX10MM	67	EMPAVELI	62
<i>drospirenone/ethinyl estradiol</i>	55	EMPLICITI	23
DROSPIRENONE/ETHINYLMODIFIED	55	EMRELIS	23
ESTRADIOL/LEVOMEFOLATE		EMSAM	11
CALCIUM		<i>emtricitabine</i>	29
DROXIA	17	<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate</i>	28
<i>droxidopa</i>	35	<i>emtricitabine/tenofovir disoproxil fumarate</i>	29
DULERA	73	EMTRIVA	29
<i>duloxetine hydrochloride</i>	11	<i>emzahh</i>	59
DUPIXENT	62	<i>enalapril maleate</i>	36
<i>duramorph</i>	2	<i>enalapril maleate/hydrochlorothiazide</i>	39
<i>dutasteride</i>	53	<i>enalaprilat</i>	36
DYSPORT	27	ENBREL	64
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	67	ENBREL MINI	64
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	67	ENBREL SURECLICK	64
EASY COMFORT PEN NEEDLES 29GX4MM	67	ENDARI	51
<i>econazole nitrate</i>	13	<i>endocet</i>	2
EDURANT	28	ENGERIX-B	65
EDURANT PED	28	ENHERTU	23
<i>efavirenz</i>	28	<i>enilloring</i>	55
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	28	<i>enoxaparin sodium</i>	33
		<i>enpresse-28</i>	55
		ENSACOVE	20

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>enskyce</i>	55	ESTRING	56
<i>entacapone</i>	25	<i>ethacrynat e sodium</i>	39
<i>entecavir</i>	28	<i>ethambutol hydrochloride</i>	15
ENTRESTO	39	<i>ethosuximide</i>	9
<i>enulose</i>	49	<i>ethynodiol diacetate/ethinyl estradiol</i>	56
EPCLUSA	28	<i>etodolac er</i>	1
EPIDIOLEX	8	<i>etonogestrel/ethinyl estradiol</i>	56
<i>epinephrine</i>	71	ETOPOPHOS	20
<i>epitol</i>	10	<i>etoposide</i>	20
EPKINLY	18	<i>etravirine</i>	28
<i>eplerenone</i>	40	EULEXIN	16
EPOGEN	34	<i>euthyrox</i>	59
<i>epoprostenol sodium</i>	72	<i>everolimus</i>	20
EPRONTIA	8	<i>everolimus</i>	64
ERBITUX	23	EVOMELA	16
ERGOLOID MESYLATES	10	EVOTAZ	30
ERGOMAR	14	<i>exemestane</i>	19
ERGOTAMINE TARTRATE/CAFFEINE	14	EXKIVITY	20
<i>eribulin mesylate</i>	18	EXONDYS 51	51
ERIVEDGE	20	EXSERVAN	42
ERLEADA	16	EXTAVIA	42
<i>erlotinib hydrochloride</i>	20	<i>ezetimibe</i>	40
<i>errin</i>	59	FABRAZYME	51
<i>ertapenem sodium</i>	7	<i>falmina</i>	56
<i>ery</i>	45	<i>famciclovir</i>	30
ERYTHROCIN LACTOBIONATE	7	<i>famotidine</i>	50
<i>erythrocin stearate</i>	7	<i>famotidine premixed</i>	50
<i>erythromycin</i>	45	FANAPT	26
<i>erythromycin</i>	69	FANAPT TITRATION PACK	26
<i>erythromycin base</i>	7	FARXIGA	40
<i>erythromycin dr</i>	7	FASLODEX	17
<i>erythromycin ethylsuccinate</i>	7	<i>febuxostat</i>	14
<i>erythromycin lactobionate</i>	7	<i>feirza 1.5/30</i>	56
<i>escitalopram oxalate</i>	11	<i>feirza 1/20</i>	56
<i>eslicarbazepine acetate</i>	10	<i>felbamate</i>	8
<i>esmolol hcl</i>	37	<i>felodipine er</i>	37
<i>esmolol hydrochloride in sodium chloride</i>	37	FEMRING	56
<i>esmolol hydrochloride in sodium chloride double strength</i>	37	<i>fenofibrate</i>	40
<i>esmolol hydrochloride/sodium chloride</i>	37	<i>fenofibrate micronized</i>	40
<i>esomeprazole magnesium</i>	51	<i>fenofibric acid</i>	40
<i>estarrylla</i>	55	<i>fenofibric acid dr</i>	40
ESTRADIOL	55	<i>fenoprofen calcium</i>	1
<i>estradiol valerate</i>	55	<i>fentanyl</i>	1
<i>estradiol/norethindrone acetate</i>	55	<i>fentanyl citrate oral transmucosal</i>	2
		FERRIPROX	49

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
FERRIPROX TWICE-A-DAY	49	fluvoxamine maleate	12
<i>fesoterodine fumarate er</i>	52	fluvoxamine maleate er	12
FETROJA	6	FOLOTYN	17
FETZIMA	11	<i>fomepizole</i>	67
FETZIMA TITRATION PACK	12	<i>fondaparinux sodium</i>	33
<i>finasteride</i>	53	FORTEO	66
<i>fingolimod hydrochloride</i>	42	<i>fosamprenavir calcium</i>	30
FINTEPLA	8	<i>fosaprepitant dimeglumine</i>	13
<i>finzala</i>	56	<i>fosfomycin tromethamine</i>	5
FIRMAGON	60	<i>fosinopril sodium</i>	36
<i>flac</i>	70	<i>fosinopril sodium/hydrochlorothiazide</i>	39
<i>flavoxate hcl</i>	52	<i>fosphenytoin sodium</i>	10
FLEBOGAMMA DIF	61	FOSRENOL	49
<i>flecainide acetate</i>	36	FOTIVDA	20
FLOXURIDINE	17	FRAGMIN	33
<i>fluconazole</i>	14	FRINDOVYX	16
<i>fluconazole in nacl</i>	13	FRUZAQLA	20
<i>fluconazole in sodium chloride</i>	13	FULPHILA	34
<i>flucytosine</i>	14	<i>fulvestrant</i>	17
FLUDARABINE PHOSPHATE	20	<i>furosemide</i>	39
<i>fludrocortisone acetate</i>	53	FUZEON	29
<i>flunisolide</i>	70	FYARRO	20
<i>fluocinolone acetonide</i>	44	<i>fyavolv</i>	56
<i>fluocinolone acetonide</i>	70	FYCOMPRA	8
<i>fluocinolone acetonide body</i>	44	FYLNETRA	34
<i>fluocinolone acetonide ear drops</i>	70	<i>gabapentin</i>	9
<i>fluocinolone acetonide scalp</i>	44	GABLOFEN	27
<i>fluocinolone acetonide topical</i>	44	GALAFOLD	51
<i>fluocinonide</i>	44	<i>galantamine hydrobromide</i>	11
<i>fluoride</i>	47	<i>galantamine hydrobromide er</i>	11
<i>fluorometholone</i>	69	<i>galbriela</i>	56
<i>fluorouracil</i>	17	<i>gallifrey</i>	59
FLUOROURACIL	45	GAMASTAN	61
<i>fluoxetine dr</i>	12	GAMMAGARD LIQUID	61
<i>fluoxetine hydrochloride</i>	12	GAMMAGARD S/D IGA LESS THAN	61
<i>fluphenazine decanoate</i>	25	1MCG/ML	
<i>fluphenazine hcl</i>	25	GAMMAKED	61
<i>fluphenazine hydrochloride</i>	25	GAMMAPLEX	61
<i>flurazepam hydrochloride</i>	73	GAMUNEX-C	61
<i>flurbiprofen</i>	1	<i>ganciclovir</i>	27
<i>flurbiprofen sodium</i>	69	GARDASIL 9	65
<i>fluticasone propionate</i>	44	<i>gatifloxacin</i>	69
<i>fluticasone propionate</i>	70	GATTEX	50
<i>fluticasone propionate/salmeterol</i>	73	<i>gavilyte-c</i>	50
<i>fluticasone propionate/salmeterol diskus</i>	73	<i>gavilyte-g</i>	50

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>gavilyte-n/flavor pack</i>	50	GVOKE PFS	33
GAVRETO	20	HADLIMA	64
GAZYVA	23	HADLIMA PUSHTOUCH	64
<i>gefitinib</i>	20	HAEGARDA	61
<i>gemcitabine hydrochloride</i>	17	<i>hailey 1.5/30</i>	56
<i>gemfibrozil</i>	40	<i>hailey 24 fe</i>	56
<i>gemmily</i>	56	<i>hailey fe 1.5/30</i>	56
GEMTESA	52	<i>hailey fe 1/20</i>	56
<i>generlac</i>	49	HALAVEN	18
<i>gengraf</i>	64	halobetasol propionate	44
<i>gentamicin sulfate</i>	4	haloperidol	26
<i>gentamicin sulfate</i>	69	haloperidol decanoate	25
<i>gentamicin sulfate pediatric</i>	4	haloperidol lactate	26
<i>gentamicin sulfate/0.9% sodium chloride</i>	4	HARVONI	28
GENVOYA	28	HAVRIX	65
GILENYA	42	<i>heather</i>	59
GILOTrif	20	HEMANGEOL	37
GLASSIA	51	HEPAGAM B	61
<i>glatiramer acetate</i>	42	<i>heparin sodium</i>	34
<i>glatopa</i>	42	<i>heparin sodium/d5w</i>	34
GLEOSTINE	16	<i>heparin sodium/dextrose</i>	34
<i>glimepiride</i>	31	<i>heparin sodium/nacl 0.45%</i>	34
GLIPIZIDE	32	<i>heparin sodium/sodium chloride</i>	34
<i>glipizide er</i>	31	<i>heparin sodium/sodium chloride 0.9%</i>	34
<i>glipizide xl</i>	31	<i>heparin sodium/sodium chloride 0.9% premix</i>	34
<i>glipizide/metformin hydrochloride</i>	31	HEPLISAV-B	65
GLOBAL ALCOHOL PREP EASE PADS	67	HERCEPTIN	23
GLUCAGEN HYPOKIT	32	HERCEPTIN HYLECTA	23
GLUCAGON EMERGENCY KIT	32	HERZUMA	23
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	32	HETLIOZ LQ	73
<i>glucose (dextrose) 50%</i>	47	HIBERIX	65
<i>glycopyrrolate</i>	50	HIZENTRA	61
<i>glydo</i>	3	HUMALOG	33
GLYXAMBI	32	HUMALOG JUNIOR KWIKPEN	33
GOMEKLI	20	HUMALOG KWIKPEN	33
GRAFAPEX	16	HUMALOG MIX 50/50	33
<i>gransetron hcl</i>	13	HUMALOG MIX 50/50 KWIKPEN	33
<i>gransetron hydrochloride</i>	13	HUMALOG MIX 75/25	33
GRANIX	34	HUMALOG MIX 75/25 KWIKPEN	33
<i>griseofulvin microsize</i>	14	<i>humulin 70/30</i>	33
<i>griseofulvin ultramicrosize</i>	14	HUMULIN 70/30 KWIKPEN	33
GVOKE HYPOPEN 1-PACK	32	<i>humulin n</i>	33
GVOKE HYPOPEN 2-PACK	32	HUMULIN N KWIKPEN	33
GVOKE KIT	32	<i>humulin r</i>	33

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
HUMULIN R U-500 (CONCENTRATED)	33	<i>imipramine hydrochloride</i>	12
HUMULIN R U-500 KWIKPEN	33	<i>imipramine pamoate</i>	12
<i>hydralazine hcl</i>	41	<i>imiquimod</i>	45
<i>hydralazine hydrochloride</i>	41	IMJUDO	23
<i>hydrochlorothiazide</i>	39	IMKELDI	21
hydrocodone bitartrate/acetaminophen	2	IMOVAX RABIES (H.D.C.V.)	65
hydrocodone/acetaminophen	2	IMPAVIDO	5
<i>hydrocodone/ibuprofen</i>	2	IMVEXXY MAINTENANCE PACK	56
<i>hydrocortisone</i>	44	IMVEXXY STARTER PACK	56
<i>hydrocortisone</i>	53	<i>incassia</i>	59
<i>hydrocortisone</i>	66	INCRELEX	54
<i>hydrocortisone butyrate</i>	44	<i>indapamide</i>	39
<i>hydrocortisone butyrate (lipid)</i>	44	INFANRIX	65
<i>hydrocortisone butyrate (lipophilic)</i>	44	INFLECTRA	64
<i>hydromorphone hcl</i>	2	<i>infliximab</i>	64
<i>hydromorphone hydrochloride</i>	3	INGREZZA	42
<i>hydroxychloroquine sulfate</i>	25	<i>INLYTA</i>	21
<i>hydroxyurea</i>	17	<i>INQOVI</i>	21
<i>hydroxyzine hcl</i>	71	<i>INREBIC</i>	18
<i>hydroxyzine hydrochloride</i>	71	INTELENCE	29
<i>hydroxyzine pamoate</i>	71	INTRALIPID	67
<i>HYPERHEP B</i>	62	<i>introvale</i>	56
<i>HYPERRHO S/D</i>	62	INVEGA HAFYERA	26
HYPERRHO S/D MINI-DOSE	62	INVEGA SUSTENNA	26
<i>HYQVIA</i>	62	INVEGA TRINZA	26
<i>ibandronate sodium</i>	66	IONOSOL-MB/DEXTROSE 5%	47
<i>IBRANCE</i>	18	IPOL INACTIVATED IPV	65
<i>IBRANCE</i>	21	<i>ipratropium bromide</i>	71
<i>ibu</i>	1	<i>ipratropium bromide/albuterol sulfate</i>	73
<i>ibuprofen</i>	1	<i>irbesartan</i>	35
<i>icatibant acetate</i>	61	<i>irbesartan/hydrochlorothiazide</i>	39
<i>iclevia</i>	56	<i>irinotecan hydrochloride</i>	20
<i>ICLUSIG</i>	21	ISENTRESS	28
<i>icosapent ethyl</i>	40	ISENTRESS HD	28
<i>idarubicin hcl</i>	18	<i>isibloom</i>	56
<i>idarubicin hydrochloride</i>	18	ISOLYTE-P/DEXTROSE 5%	47
<i>IDHIFA</i>	21	ISOLYTE-S	47
<i>IFOSFAMIDE</i>	16	ISOLYTE-S PH 7.4	47
<i>ILARIS</i>	62	<i>isoniazid</i>	15
<i>imatinib mesylate</i>	21	<i>isoproterenol hydrochloride</i>	71
<i>IMBRUVICA</i>	21	<i>isosorbide dinitrate</i>	40
<i>IMDELLTRA</i>	18	<i>isosorbide dinitrate/hydralazine</i>	39
<i>IMFINZI</i>	23	<i>hydrochloride</i>	
<i>imipenem/cilastatin</i>	7	<i>isosorbide mononitrate</i>	40
<i>imipramine hcl</i>	12	<i>isosorbide mononitrate er</i>	40

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>isotonic gentamicin</i>	4	KALBITOR	61
<i>isotretinoi</i> n	43	<i>kalliga</i>	56
<i>isradipine</i>	37	KALYDECO	71
ISTODAX	18	KANJINTI	23
ISTURISA	54	KANUMA	51
ITOVEBI	18	KAPSPARGO SPRINKLE	37
<i>itraconazole</i>	14	<i>kariva</i>	56
<i>ivabradine hydrochloride</i>	39	<i>kcl 0.075%/d5w/nacl 0.45%</i>	47
IVERMECTIN	24	<i>kcl 0.15%/d5w/nacl 0.2%</i>	47
<i>ivermectin</i>	45	<i>kcl 0.15%/d5w/nacl 0.225%</i>	47
IVRA	16	<i>kcl 0.15%/d5w/nacl 0.45%</i>	47
IWLFIN	18	<i>kcl 0.15%/d5w/nacl 0.9%</i>	47
IXCHIQ	65	<i>kcl 0.3%/d5w/nacl 0.45%</i>	47
IXEMPRA KIT	18	<i>kcl 0.3%/d5w/nacl 0.9%</i>	47
IXIARO	65	<i>kelnor 1/35</i>	56
<i>jaimiess</i>	56	<i>kelnor 1/50</i>	56
JAKAFI	21	<i>kemoplat</i>	16
<i>jantoven</i>	34	KEPIVANCE	43
JANUMET	32	KERENDIA	40
JANUMET XR	32	<i>ketoconazole</i>	14
JANUVIA	32	<i>ketorolac tromethamine</i>	1
JARDIANCE	40	<i>ketorolac tromethamine</i>	69
<i>jasmiel</i>	56	KEYTRUDA	23
JAYPIRCA	21	KIMMTRAK	18
JEMPERLI	23	KIMYRSA	5
<i>jencycla</i>	59	KINERET	62
JENTADUETO	32	KINRIX	65
JENTADUETO XR	32	<i>kionex</i>	49
JEVTANA	18	KISQALI	21
<i>jinteli</i>	56	KISQALI FEMARA 200 DOSE	18
<i>jolessa</i>	56	KISQALI FEMARA 400 DOSE	18
<i>joyeaux</i>	56	KISQALI FEMARA 600 DOSE	18
<i>juleber</i>	56	<i>klayesta</i>	14
JULUCA	28	<i>klor-con 10</i>	47
<i>junel 1.5/30</i>	56	<i>klor-con 8</i>	47
<i>junel 1/20</i>	56	<i>klor-con m10</i>	47
<i>junel fe 1.5/30</i>	56	<i>klor-con m15</i>	47
<i>junel fe 1/20</i>	56	<i>klor-con m20</i>	47
<i>junel fe 24</i>	56	KOSELUGO	21
JUXTAPID	40	<i>kourzeq</i>	43
JYLAMVO	64	KRAZATI	21
JYNARQUE	49	KRISTALOSE	49
JYNNEOS	65	KRYSTEXXA	14
KADCYLA	23	<i>kurvelo</i>	56
<i>kaitlib fe</i>	56	KYPROLIS	20

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>labetalol hydrochloride</i>	37	LEUKERAN	16
<i>lacosamide</i>	10	LEUPROLIDE ACETATE	60
<i>lactated ringers irrigation</i>	67	<i>levalbuterol hcl</i>	71
<i>lactulose</i>	49	<i>levalbuterol hydrochloride</i>	71
LAGEVRIO	30	<i>levalbuterol tartrate hfa</i>	71
<i>lamivudine</i>	28	LEVETIRACETAM	9
<i>lamivudine</i>	29	<i>levetiracetam er</i>	9
<i>lamivudine/zidovudine</i>	29	<i>levetiracetam/sodium chloride</i>	9
<i>lamotrigine</i>	9	<i>levobunolol hcl</i>	69
<i>lamotrigine er</i>	8	<i>levocarnitine</i>	67
<i>lamotrigine starter kit/blue</i>	8	<i>levocetirizine dihydrochloride</i>	71
<i>lamotrigine starter kit/green</i>	8	LEVOFLOXACIN	7
<i>lamotrigine starter kit/orange</i>	8	<i>levofloxacin</i>	69
<i>lamotrigine titration</i>	8	<i>levofloxacin in d5w</i>	7
LANOXIN PEDIATRIC	36	<i>levoleucovorin</i>	19
LANREOTIDE ACETATE	60	<i>levonest</i>	57
<i>lansoprazole</i>	51	<i>levonorgestrel and ethinyl estradiol</i>	57
<i>lanthanum carbonate</i>	49	<i>levonorgestrel/ethinyl estradiol</i>	57
LANTUS	33	<i>levonorgestrel/ethinyl estradiol/ferrous bisglycinate</i>	57
LANTUS SOLOSTAR	33	<i>levora 0.15/30-28</i>	57
<i>lapatinib ditosylate</i>	21	<i>levo-t</i>	60
<i>larin 1.5/30</i>	56	<i>levothyroxine sodium</i>	60
<i>larin 1/20</i>	56	<i>levoxyl</i>	60
<i>larin 24 fe</i>	56	LEXIVA	30
<i>larin fe 1.5/30</i>	56	<i>l-glutamine</i>	51
<i>larin fe 1/20</i>	56	LIBERVANT	9
<i>latanoprost</i>	70	LIBTAYO	23
<i>layolis fe</i>	56	<i>lidocaine</i>	3
LAZCLUZE	19	<i>lidocaine hcl</i>	3
LEDIPASVIR/SOFOSBUVIR	28	<i>lidocaine hcl</i>	36
<i>leena</i>	56	<i>lidocaine hcl</i>	43
<i>leflunomide</i>	64	<i>lidocaine hcl in d5w</i>	36
LEMTRADA	62	<i>lidocaine hcl jelly</i>	3
<i>lenalidomide</i>	17	<i>lidocaine hcl/dextrose</i>	36
LENVIMA 10 MG DAILY DOSE	21	<i>lidocaine hydrochloride</i>	3
LENVIMA 12MG DAILY DOSE	21	<i>lidocaine hydrochloride viscous</i>	43
LENVIMA 14 MG DAILY DOSE	21	<i>lidocaine viscous</i>	43
LENVIMA 18 MG DAILY DOSE	21	<i>lidocaine/prilocaine</i>	3
LENVIMA 20 MG DAILY DOSE	21	LILETTA	59
LENVIMA 24 MG DAILY DOSE	21	<i>lincomycin hydrochloride</i>	5
LENVIMA 4 MG DAILY DOSE	21	<i>linezolid</i>	5
LENVIMA 8 MG DAILY DOSE	21	LINZESS	49
<i>lessina</i>	57	LIORESAL INTRATHECAL	27
<i>letrozole</i>	19	LIOTHYRONINE SODIUM	60
<i>leucovorin calcium</i>	19		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>lisinopril</i>	36	LYSODREN	19
<i>lisinopril/hydrochlorothiazide</i>	39	LYTGOBI	21
<i>lithium</i>	31	<i>lyza</i>	59
<i>lithium carbonate</i>	31	MAGNESIUM SULFATE	47
<i>lithium carbonate er</i>	31	<i>magnesium sulfate in d5w</i>	47
LITHOSTAT	53	<i>magnesium sulfate/dextrose</i>	47
LIVTENCITY	27	<i>malathion</i>	45
LO LOESTRIN FE	57	<i>maraviroc</i>	29
<i>lofexidine hydrochloride</i>	4	MARGENZA	23
<i>lojaimiess</i>	57	<i>marlissa</i>	57
LOKELMA	49	MARPLAN	11
LONSURF	19	MATULANE	16
<i>loperamide hydrochloride</i>	50	MAVENCLAD	42
<i>lopinavir/ritonavir</i>	30	MAVYRET	28
LOQTORZI	23	MAYZENT	42
<i>lorazepam</i>	31	MAYZENT STARTER PACK	42
LORBRENA	21	<i>meclizine hcl</i>	13
<i>loryna</i>	57	<i>meclofenamate sodium</i>	1
<i>losartan potassium</i>	35	<i>medroxyprogesterone acetate</i>	59
<i>losartan potassium/hydrochlorothiazide</i>	39	<i>mefenamic acid</i>	1
<i>loteprednol etabonate</i>	69	<i>mefloquine hydrochloride</i>	25
<i>lovastatin</i>	40	<i>megestrol acetate</i>	59
<i>low-ogestrel</i>	57	MEKINIST	21
<i>loxapine</i>	26	MEKTOVI	21
<i>lo-zumandimine</i>	57	<i>meleya</i>	59
LUBIPROSTONE	49	<i>meloxicam</i>	1
LUCEMYRA	4	<i>melphalan hydrochloride</i>	16
LUMAKRAS	21	<i>memantine hcl titration pak</i>	11
LUMIGAN	70	<i>memantine hydrochloride</i>	11
LUMIZYME	51	<i>memantine hydrochloride er</i>	11
LUNSUMIO	23	<i>memantine/donepezil hydrochloride er</i>	10
LUPKYNIS	64	MENACTRA	65
LUPRON DEPOT (1-MONTH)	60	MENQUADFI	65
LUPRON DEPOT (3-MONTH)	60	MENVEO	65
LUPRON DEPOT (4-MONTH)	60	<i>meprobamate</i>	30
LUPRON DEPOT (6-MONTH)	60	<i>mercaptopurine</i>	17
LUPRON DEPOT-PED (1-MONTH)	60	<i>meropenem</i>	7
LUPRON DEPOT-PED (3-MONTH)	60	MEROPENEM/SODIUM CHLORIDE	7
LUPRON DEPOT-PED (6-MONTH)	54	<i>merzee</i>	57
<i>lurasidone hydrochloride</i>	26	<i>mesalamine</i>	66
<i>lutera</i>	57	<i>mesalamine dr</i>	66
LYBALVI	26	<i>mesalamine er</i>	66
<i>lyleq</i>	59	<i>mesna</i>	24
<i>lyllana</i>	57	MESNEX	24
LYNPARZA	21	<i>metformin hydrochloride</i>	32

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>metformin hydrochloride er</i>	32	<i>microgestin fe 1.5/30</i>	57
<i>methadone hcl</i>	1	<i>microgestin fe 1/20</i>	57
<i>methadone hydrochloride</i>	1	<i>midazolam hcl</i>	31
<i>methadone hydrochloride intensol</i>	1	<i>midazolam hydrochloride</i>	31
<i>methadose</i>	1	<i>midodrine hydrochloride</i>	35
<i>methadose sugar-free</i>	1	<i>mifepristone</i>	60
<i>methazolamide</i>	70	<i>MIGERGOT</i>	14
<i>methenamine hippurate</i>	5	<i> miglitol</i>	32
<i>methergine</i>	67	<i> miglustat</i>	51
<i>methimazole</i>	61	<i> mili</i>	57
<i>methocarbamol</i>	73	<i> milrinone lactate in dextrose</i>	39
<i>methotrexate</i>	64	<i> mimvey</i>	57
<i>methotrexate sodium</i>	64	<i> MINOCIN</i>	8
<i>methoxsalen</i>	45	<i> minocycline hcl</i>	8
<i>methscopolamine bromide</i>	50	<i> minocycline hydrochloride</i>	8
METHSUXIMIDE	9	<i> minoxidil</i>	41
<i>methylergonovine maleate</i>	67	<i> minzoya</i>	57
<i>methylphenidate hydrochloride</i>	41	<i> mirtazapine</i>	11
<i>methylphenidate hydrochloride cd</i>	41	<i> mirtazapine odt</i>	11
<i>methylphenidate hydrochloride er</i>	41	<i> misoprostol</i>	51
<i>methylprednisolone</i>	53	<i> mitomycin</i>	19
<i>methylprednisolone acetate</i>	53	<i> mitoxantrone hcl</i>	42
<i>methylprednisolone dose pack</i>	53	<i> M-M-R II</i>	65
<i>methylprednisolone sodium succinate</i>	53	<i> MODAFINIL</i>	73
<i>methylprednisolone sodiumsuccinate</i>	53	<i> moexipril hydrochloride</i>	36
<i>metoclopramide hcl</i>	50	MOLINDONE HYDROCHLORIDE	26
<i>metoclopramide hydrochloride</i>	50	<i> mometasone furoate</i>	44
<i>metoclopramide odt</i>	50	<i> mondoxyne nl</i>	8
<i>metolazone</i>	39	<i> MONJUVI</i>	23
<i>metoprolol succinate er</i>	37	<i> mono-linyah</i>	57
<i>metoprolol tartrate</i>	37	<i> montelukast sodium</i>	71
<i>metoprolol/hydrochlorothiazide</i>	39	<i> morphine sulfate</i>	3
<i>metronidazole</i>	5	<i> morphine sulfate er</i>	1
<i>metronidazole</i>	43	<i> MOUNJARO</i>	32
<i>metronidazole vaginal</i>	5	<i> MOVANTIK</i>	49
<i>metyrosine</i>	39	<i> moxifloxacin hydrochloride/sodium</i>	7
<i>mexiletine hydrochloride</i>	36	<i> hydrochloride</i>	
<i>MIACALCIN</i>	66	<i> moxifloxacin hydrochloride</i>	7
<i>mibelas 24 fe</i>	57	<i> moxifloxacin hydrochloride</i>	69
<i>micafungin</i>	14	<i> MOZOBIL</i>	34
<i>miconazole 3</i>	14	<i> MRESVIA</i>	65
MICRHOGAM ULTRA-FILTERED PLUS	62	<i> MULPLETA</i>	34
<i>microgestin 1.5/30</i>	57	<i> MULTAQ</i>	36
<i>microgestin 1/20</i>	57	<i> multiple electrolytes injection type I</i>	47
<i>microgestin 24 fe</i>	57	<i> mupirocin</i>	45

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>mutamycin</i>	19	NEUPOGEN	34
MVASI	23	<i>nevirapine</i>	29
MYCOPHENOLATE MOFETIL	64	<i>nevirapine er</i>	29
<i>mycophenolic acid dr</i>	64	NEXPLANON	59
MYLOTARG	23	NEXTERONE	36
MYOBLOC	27	NEXTSTELLIS	57
MYRBETRIQ	52	<i>niacin</i>	40
NABI-HB	62	<i>niacin er</i>	40
<i>nabumetone</i>	1	<i>niacor</i>	40
<i>nadolol</i>	37	<i>nicardipine hcl</i>	37
NAFCILLIN	6	NICARDIPINE HYDROCHLORIDE	37
<i>nafcillin sodium</i>	6	NICARDIPINE	37
<i>naftifine hydrochloride</i>	14	HYDROCHLORIDE/SODIUM	
NAGLAZYME	51	CHLORIDE	
<i>nalbuphine hydrochloride</i>	3	NICOTROL INHALER	4
<i>naloxone hcl</i>	4	<i>nifedipine er</i>	37
<i>naloxone hydrochloride</i>	4	<i>nikki</i>	57
<i>naltrexone hydrochloride</i>	3	<i>nilotinib</i>	21
NAMZARIC	10	<i>nilutamide</i>	16
<i>naproxen</i>	1	<i>nimodipine</i>	37
<i>naproxen sodium</i>	1	NINLARO	21
NATACYN	69	<i>nitazoxanide</i>	25
NATAZIA	57	<i>nitisinone</i>	51
<i>nateglinide</i>	32	NITRO-BID	40
NAYZILAM	9	<i>nitrofurantoin macrocrystals</i>	5
<i>nebivolol hydrochloride</i>	37	<i>nitrofurantoin monohydrate</i>	5
<i>necon 0.5/35-28</i>	57	<i>nitrofurantoin monohydrate/macrocrys</i>	5
<i>nefazodone hydrochloride</i>	12	<i>nitroglycerin</i>	41
<i>nelarabine</i>	17	NITROGLYCERIN	50
<i>neomycin sulfate</i>	4	<i>nitroglycerin in dextrose 5%</i>	40
<i>neomycin/bacitracin/polymyxin</i>	68	<i>nitroglycerin transdermal</i>	40
<i>neomycin/polymyxin b sulfates</i>	4	NIVA THYROID	60
<i>neomycin/polymyxin/bacitracin/hydrocortis</i>	68	NIVESTYM	34
<i>one</i>		<i>nizatidine</i>	51
<i>neomycin/polymyxin/dexamethasone</i>	68	<i>nora-be</i>	59
<i>neomycin/polymyxin/gramicidin</i>	68	NORDITROPIN FLEXPRO	54
<i>neomycin/polymyxin/hc</i>	70	<i>norelgestromin/ethinyl estradiol</i>	57
<i>neomycin/polymyxin/hydrocortisone</i>	68	<i>norepinephrine bitartrate</i>	39
<i>neomycin/polymyxin/hydrocortisone</i>	70	<i>norethindrone</i>	59
<i>neo-polycin</i>	68	<i>norethindrone & ethinyl estradiol ferrous</i>	57
<i>neo-polycin hc</i>	68	<i>fumarate</i>	
NERLYNX	21	<i>norethindrone acetate</i>	59
NESINA	32	<i>norethindrone acetate/ethinyl estradiol</i>	57
NEULASTA	34	<i>norethindrone acetate/ethinyl</i>	
NEULASTA ONPRO KIT	34	<i>estradiol/ferrous fumarate</i>	57

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	57	<i>nystatin/triamcinolone</i>	45
<i>norgestimate/ethinyl estradiol</i>	57	<i>nystatin/triamcinolone acetonide</i>	45
<i>norlyroc</i>	59	<i>nystop</i>	14
NORMOSOL-M/D5W	47	NYVEPRIA	34
NORMOSOL-R	47	OCALIVA	50
<i>nortrel 0.5/35 (28)</i>	57	<i>ocella</i>	57
<i>nortrel 1/35</i>	57	OCTAGAM	62
<i>nortrel 7/7/7</i>	57	<i>octreotide acetate</i>	60
<i>nortriptyline hcl</i>	12	ODEFSEY	29
<i>nortriptyline hydrochloride</i>	12	ODOMZO	21
NORVIR	30	OFEV	72
NOVAREL	54	<i>ofloxacin</i>	7
NOVOLOG	33	<i>ofloxacin</i>	69
NOVOLOG FLEXPEN	33	<i>ofloxacin</i>	70
NOVOLOG FLEXPEN RELION	33	OGIVRI	23
NOVOLOG MIX 70/30	33	OGSIVEO	19
NOVOLOG MIX 70/30 PREFILLED FLEXPEN	33	OJEMDA	19
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION	33	OJJAARA	21
NOVOLOG MIX 70/30 RELION	33	OLANZAPINE	26
NOVOLOG PENFILL	33	<i>olanzapine odt</i>	26
NOVOLOG RELION	33	<i>olanzapine/fluoxetine</i>	11
NOXAFIL	14	<i>olmesartan medoxomil</i>	35
<i>np thyroid 120</i>	60	<i>olmesartan medoxomil/hydrochlorothiazide</i>	39
<i>np thyroid 15</i>	60	<i>olopatadine hydrochloride</i>	69
<i>np thyroid 30</i>	60	<i>omega-3-acid ethyl esters</i>	40
<i>np thyroid 60</i>	60	<i>omeprazole</i>	51
<i>np thyroid 90</i>	60	<i>omeprazole dr</i>	51
NPLATE	34	OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5)	67
NUBEQA	16	OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5)	67
NUCALA VIAL; PREFILLED SYRINGE	73	OMNIPOD 5 G7 INTRO KIT (GEN 5)	67
NUEDEXTA	42	OMNIPOD 5 G7 PODS (GEN 5)	67
NULOJIX	64	OMNIPOD 5 LIBRE2 PLUS G6	67
NUPLAZID	26	OMNIPOD 5 LIBRE2 PLUS G6 PODS	67
NURTEC	14	OMNIPOD CLASSIC PDM STARTER KIT (GEN 3)	68
NUTRILIPID	67	OMNIPOD CLASSIC PODS (GEN 3)	68
NUVESSA	5	OMNIPOD DASH INTRO KIT (GEN 4)	68
NUZYRA	8	OMNIPOD DASH PDM KIT (GEN 4)	68
<i>nyamyc</i>	14	OMNIPOD DASH PODS (GEN 4)	68
<i>nylia 1/35</i>	57	OMNITROPE	54
<i>nylia 7/7/7</i>	57	ONCASPAR	19
<i>nymyo</i>	57	<i>ondansetron hcl</i>	13
<i>nystatin</i>	14	<i>ondansetron hydrochloride</i>	13

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>ondansetron odt</i>	13	<i>oxycodone/acetaminophen</i>	3
ONGENTYS	25	OXYCONTIN	2
ONTRUZANT	23	<i>oxymorphone hydrochloride</i>	3
ONUREG	19	<i>oxymorphone hydrochloride er</i>	2
OPDIVO	23	<i>oxymorphone hydrochlorideer</i>	2
OPDIVO QVANTIG	16	OZEMPIC	32
OPDUALAG	19	<i>paclitaxel</i>	19
OPIPZA	26	<i>paclitaxel protein-bound particles</i>	19
OPSUMIT	72	PADCEV	23
OPVEE	4	<i>paliperidone er</i>	26
<i>oralone dental paste</i>	43	<i>palonosetron hydrochloride</i>	13
ORAVIG	14	<i>pamidronate disodium</i>	66
ORBACTIV	5	PANCREAZE	52
ORENCIA	62	PANRETIN	24
ORENCIA	64	<i>pantoprazole sodium</i>	51
ORENCIA CLICKJECT	62	<i>paraplatin</i>	16
ORENITRAM	72	PARICALCITOL	66
ORENITRAM TITRATION KIT MONTH	72	<i>paroxetine hcl</i>	12
1		<i>paroxetine hcl er</i>	12
ORENITRAM TITRATION KIT MONTH	72	<i>paroxetine hydrochloride</i>	12
2		<i>paroxetine hydrochloride er</i>	12
ORENITRAM TITRATION KIT MONTH	72	PAXLOVID	30
3		<i>pazopanib hydrochloride</i>	21
ORFADIN	51	PEDIARIX	65
ORGOVYX	60	PEDVAX HIB	65
ORKAMBI	71	<i>peg-3350/electrolytes</i>	50
ORLADEYO	61	<i>peg-3350/electrolytes/ascorbate</i>	50
ORSERDU	17	<i>peg-3350/nacl/na bicarbonate/kcl</i>	50
<i>oseltamivir phosphate</i>	30	PEGASYS	63
OSENI	32	PEGASYS	64
OSPHENA	59	PEMAZYRE	21
OTEZLA	45	PEMETREXED	17
OTEZLA	62	PEMETREXED	19
OTULFI	62	<i>pemetrexed disodium</i>	17
<i>oxacillin sodium</i>	7	PEMFEXY	17
<i>oxaliplatin</i>	16	PEMRYDI RTU	17
<i>oxaprozin</i>	1	PENBRAYA	65
<i>oxazepam</i>	31	<i>penicillamine</i>	49
<i>oxcarbazepine</i>	10	<i>penicillin g potassium</i>	7
<i>OXERVATE</i>	68	<i>penicillin g potassium in iso-osmotic</i>	7
<i>oxybutynin chloride</i>	52	<i>dextrose</i>	
<i>oxybutynin chloride er</i>	52	<i>penicillin v potassium</i>	7
<i>oxycodone hcl</i>	3	PENTACEL	65
<i>oxycodone hydrochloride</i>	3	<i>pentamidine isethionate</i>	25
OXYCODONE HYDROCHLORIDE ER	2	<i>pentobarbital sodium</i>	73

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>pentoxifylline er</i>	39	<i>podofilox</i>	45
<i>perampanel</i>	9	<i>POLIVY</i>	23
<i>perindopril erbumine</i>	36	<i>polycin</i>	68
<i>periogard</i>	43	<i>polymyxin b sulfate</i>	5
<i>PERJETA</i>	23	<i>polymyxin b sulfate(trimethoprim sulfate)</i>	68
<i>permethrin</i>	45	<i>POMALYST</i>	17
<i>perphenazine</i>	26	<i>portia-28</i>	58
<i>perphenazine/amitriptyline</i>	11	<i>PORTRAZZA</i>	24
<i>PERSERIS</i>	26	<i>posaconazole</i>	14
<i>phenelzine sulfate</i>	11	<i>posaconazole dr</i>	14
<i>phenobarbital</i>	9	<i>potassium chloride</i>	48
<i>phenobarbital sodium</i>	9	<i>potassium chloride er</i>	48
<i>phenoxybenzamine hydrochloride</i>	35	<i>potassium chloride/dextrose</i>	48
<i>phentolamine mesylate</i>	35	<i>potassium chloride/dextrose/lactated</i>	48
<i>phenylephrine hydrochloride</i>	68	<i>ringers</i>	
<i>phenytek</i>	10	<i>potassium chloride/dextrose/sodium</i>	48
<i>phenytoin</i>	10	<i>chloride</i>	
<i>phenytoin infatabs</i>	10	<i>potassium chloride/sodium chloride</i>	48
<i>phenytoin sodium</i>	10	<i>potassium citrate er</i>	48
<i>phenytoin sodium extended</i>	10	<i>PRALATREXATE</i>	17
<i>PHESGO</i>	19	<i>PRALUENT</i>	40
<i>PHEXXI</i>	53	<i>pramipexole dihydrochloride</i>	25
<i>philith</i>	57	<i>prasugrel hydrochloride</i>	35
<i>PIFELTRO</i>	29	<i>pravastatin sodium</i>	40
<i>pilocarpine hcl</i>	70	<i>praziquantel</i>	24
<i>pilocarpine hydrochloride</i>	43	<i>prazosin hydrochloride</i>	35
<i>pilocarpine hydrochloride</i>	70	<i>prednisolone</i>	54
<i>pimecrolimus</i>	44	<i>prednisolone acetate</i>	69
<i>pimozide</i>	26	<i>prednisolone sodium phosphate</i>	53
<i>pintrea</i>	57	<i>prednisolone sodium phosphate</i>	69
<i>pindolol</i>	37	<i>prednisolone sodium phosphate odt</i>	53
<i>pioglitazone hcl</i>	32	<i>prednisone</i>	54
<i>pioglitazone hcl/metformin hcl</i>	32	<i>pregabalin</i>	9
<i>pioglitazone hcl-glimepiride</i>	32	<i>PREGNYL</i>	54
<i>pioglitazone hydrochloride</i>	32	<i>pregnyl w/diluent benzyl alcohol/nacl</i>	54
<i>piperacillin sodium/tazobactam sodium</i>	7	<i>PREHEVBARIO</i>	65
<i>PIQRAY 200MG DAILY DOSE</i>	21	<i>PREMARIN</i>	58
<i>PIQRAY 250MG DAILY DOSE</i>	21	<i>PREMASOL</i>	48
<i>PIQRAY 300MG DAILY DOSE</i>	21	<i>PREMPRO</i>	58
<i>pirfenidone</i>	72	<i>prenatal</i>	49
<i>piroxicam</i>	1	<i>prenatal 19</i>	49
<i>PLEGRIDY</i>	42	<i>PRETOMANID</i>	15
<i>PLEGRIDY STARTER PACK</i>	42	<i>prevalite</i>	40
<i>PLENAMINE</i>	48	<i>PREVYTMIS</i>	27
<i>PLERIXAFOR</i>	35	<i>PREZCOBIX</i>	30

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
PREZISTA	30	pyrimethamine	25
PRIFTIN	15	PYZCHIVA	62
PRIMAQUINE PHOSPHATE	25	QINLOCK	21
<i>primidone</i>	9	QUADRACEL	65
PRIORIX	65	<i>quetiapine fumarate</i>	11
PRIVIGEN	62	<i>quetiapine fumarate</i>	26
PROAIR DIGIHALER	71	<i>quetiapine fumarate er</i>	26
PROAIR RESPICLICK	71	<i>quinapril hydrochloride</i>	36
<i>probenecid</i>	14	QUINAPRIL/HYDROCHLOROTHIAZID	39
<i>probenecid/colchicine</i>	14	E	
<i>procainamide hydrochloride</i>	36	<i>quinidine gluconate cr</i>	36
<i>prochlorperazine</i>	13	<i>quinidine gluconate er</i>	36
<i>prochlorperazine edisylate</i>	13	<i>quinidine sulfate</i>	36
<i>prochlorperazine maleate</i>	13	<i>quinine sulfate</i>	25
PROCRT	35	QVAR REDIHALER	70
<i>procto-med hc</i>	66	RABAVERT	65
<i>proctosol hc</i>	66	<i>rabeprazole sodium</i>	51
<i>proctozone-hc</i>	66	RAGWITEK	62
PROSYSBI	52	RALDESY	12
<i>progesterone</i>	59	<i>raloxifene hydrochloride</i>	59
PROGRAF	64	<i>ramelteon</i>	73
PROLASTIN-C	52	<i>ramipril</i>	36
PROLEUKIN	19	<i>ranolazine er</i>	39
PROLIA	66	<i>rasagiline mesylate</i>	25
PROMACTA	35	RAVICTI	52
<i>promethazine hcl</i>	13	REBIF	42
<i>promethazine hydrochloride</i>	13	REBIF REBIDOSE	42
<i>promethegan</i>	13	REBIF REBIDOSE TITRATION PACK	42
<i>propafenone hcl</i>	36	REBIF TITRATION PACK	42
<i>propafenone hydrochloride</i>	36	REBLOZYL	35
<i>propafenone hydrochloride er</i>	36	<i>reclipsen</i>	58
<i>proparacaine hcl</i>	68	RECOMBIVAX HB	65
<i>propranolol hcl</i>	37	RECTIV	50
<i>propranolol hydrochloride</i>	37	REGONOL	15
<i>propranolol hydrochloride er</i>	37	REGRANEX	45
<i>propylthiouracil</i>	61	RELENZA DISKHALER	30
PROQUAD	65	RELISTOR	49
PROSOL	48	REMICADE	64
PROTOPAM CHLORIDE	68	REMODULIN	72
<i>protriptyline hcl</i>	12	RENACIDIN	53
PULMOZYME	71	RENFLEXIS	64
PURIXAN	18	RENTHYROID	60
<i>pyrazinamide</i>	15	<i>repaglinide</i>	32
<i>pyridostigmine bromide</i>	15	REPATHA	40
<i>pyridostigmine bromide er</i>	15	REPATHA PUSHTRONEX SYSTEM	40

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
REPATHA SURECLICK	40	ROMVIMZA	22
RESTASIS	68	<i>ropinirole er</i>	25
RESTASIS MULTIDOSE	68	<i>ropinirole hcl</i>	25
RETACRIT	35	<i>ropinirole hydrochloride</i>	25
RETEVMO	21	<i>rosuvastatin calcium</i>	40
RETROVIR IV INFUSION	29	<i>rosyrah</i>	58
REVUFORJ	19	ROTARIX	65
REXULTI	26	ROTATEQ	65
REYATAZ	30	<i>roweepra</i>	9
REYVOW	15	ROZLYTREK	22
REZLIDHIA	22	RUBRACA	22
REZUROCK	64	RUCONEST	61
RHOGAM ULTRA-FILTERED PLUS	62	<i>rufinamide</i>	10
RHOPHYLAC	62	RUKOBIA	29
RHOPRESSA	70	RUXIENCE	24
RIABNI	24	RYBELSUS	32
<i>ribavirin</i>	28	RYBREVANT	24
<i>ribavirin</i>	73	RYDAPT	22
RIDAURA	63	RYLAZE	19
<i>rifabutin</i>	15	RYTARY	25
<i>rifampin</i>	15	<i>sajazir</i>	61
<i>riluzole</i>	42	<i>salsalate</i>	1
<i>rimantadine hydrochloride</i>	30	SANCUSO	13
RIMSO-50	53	SANDOSTATIN LAR DEPOT	60
<i>ringers injection</i>	48	SANTYL	45
<i>ringers irrigation</i>	68	<i>sapropterin dihydrochloride</i>	52
RINVOQ	63	SARCLISA	24
RINVOQ LQ	63	SAVELLA	42
<i>risedronate sodium</i>	67	SAVELLA TITRATION PACK	42
<i>risedronate sodium dr</i>	67	SCEMBLIX	22
RISPERDAL CONSTA	26	<i>scopolamine</i>	13
<i>risperidone</i>	27	SECUADO	27
<i>risperidone er</i>	27	SELARSDI	63
<i>risperidone odt</i>	27	<i>selegiline hcl</i>	25
<i>ritonavir</i>	30	<i>selenium sulfide</i>	44
RITUXAN	24	SELZENTRY	29
RITUXAN HYCELA	24	SEREVENT DISKUS	71
<i>rivastigmine tartrate</i>	11	SEROSTIM	54
<i>rivastigmine transdermal system</i>	11	<i>sertraline hcl</i>	12
<i>rivelsa</i>	58	<i>sertraline hydrochloride</i>	12
<i>rizatriptan benzoate</i>	15	<i>setlakin</i>	58
<i>rizatriptan benzoate odt</i>	15	<i>sevelamer carbonate</i>	49
ROCKLATAN	68	<i>sevelamer hydrochloride</i>	49
<i>roflumilast</i>	72	<i>sharobel</i>	59
ROMIDEPSIN	19	SHINGRIX	65

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
SIGNIFOR	60	<i>spironolactone</i>	40
SIGNIFOR LAR	60	<i>spironolactone/hydrochlorothiazide</i>	39
<i>sildenafil</i>	72	SPRAVATO 56MG DOSE	11
SILDENAFIL CITRATE	72	SPRAVATO 84MG DOSE	11
<i>silodosin</i>	53	<i>sprintec</i> 28	58
<i>silver sulfadiazine</i>	45	SPRITAM	9
SIMBRINZA	68	SPRYCEL	22
<i>simliya</i>	58	<i>sps</i>	49
<i>simpesse</i>	58	<i>sronyx</i>	58
SIMULECT	63	<i>ssd</i>	45
<i>simvastatin</i>	40	STAMARIL	65
<i>sirolimus</i>	64	STELARA	63
SIRTURO	15	STEQEYMA	63
SIVEXTRO	5	<i>sterile water for irrigation</i>	68
SKYRIZI	63	STIMUFEND	35
SKYRIZI PEN	63	STIOLTO RESPIMAT	73
SLYND	59	STIVARGA	22
<i>sodium chloride</i>	48	STRENSIQ	52
<i>sodium chloride 0.45%</i>	48	STREPTOMYCIN SULFATE	4
<i>sodium chloride 0.9%</i>	68	STRIBILD	28
<i>sodium fluoride</i>	48	<i>subvenite</i>	9
SODIUM OXYBATE	73	<i>subvenite starter kit/blue</i>	9
<i>sodium phenylacetate/sodium benzoate</i>	68	<i>subvenite starter kit/green</i>	9
<i>sodium phenylbutyrate</i>	52	<i>subvenite starter kit/orange</i>	9
<i>sodium polystyrene sulfonate</i>	49	SUCRAID	52
<i>sodium sulfacetamide</i>	8	<i>sucralfate</i>	51
SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE	50	<i>sulfacetamide sodium</i>	8
SOFOSBUVIR/VELPATASVIR	28	<i>sulfacetamide sodium</i>	69
<i>solifenacin succinate</i>	52	<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	69
SOLIRIS	63	<i>sulfadiazine</i>	8
SOLTAMOX	17	<i>sulfamethoxazole/trimethoprim</i>	8
SOMATULINE DEPOT	61	<i>sulfamethoxazole/trimethoprim ds</i>	8
SOMAVERT	61	SULFAMYLYON	45
<i>sorafenib</i>	22	<i>sulfasalazine</i>	66
<i>sorafenib tosylate</i>	22	<i>sulindac</i>	1
<i>sorine</i>	36	<i>sumatriptan</i>	15
<i>sotalol hcl</i>	36	<i>sumatriptan succinate</i>	15
<i>sotalol hcl (af)</i>	36	SUMATRIPTAN SUCCINATE REFILL	15
<i>sotalol hcl af</i>	36	<i>sunitinib malate</i>	22
<i>sotalol hydrochloride</i>	36	SUNLENCA	29
<i>sotalol hydrochloride (af)</i>	36	SUNOSI	73
SOTYLIZE	36	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	68
SOVALDI	28	<i>syeda</i>	58
SPIRIVA RESPIMAT	71		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
SYLVANT	63	TEMODAR	16
SYMDEKO	71	<i>temsirolimus</i>	22
SYMLINPEN 120	32	TENIVAC	65
SYMLINPEN 60	32	<i>tenofovir disoproxil fumarate</i>	29
SYMPAZAN	9	TEPMETKO	22
SYMPROIC	50	<i>terazosin hcl</i>	53
SYMTUZA	30	<i>terazosin hydrochloride</i>	53
SYNAGIS	62	<i>terbinafine hcl</i>	14
SYNAREL	61	<i>terbutaline sulfate</i>	71
SYNJARDY	32	<i>terconazole</i>	14
SYNJARDY XR	32	<i>teriflunomide</i>	42
SYNTHROID	60	TERIPARATIDE	67
TABLOID	18	<i>testosterone</i>	54
TABRECTA	22	<i>testosterone cypionate</i>	54
<i>tacrolimus</i>	44	<i>testosterone enanthate</i>	54
<i>tacrolimus</i>	64	<i>testosterone pump</i>	54
<i>tadalafil</i>	53	TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT	65
<i>tadalafil</i>	72	<i>tetrabenazine</i>	42
TAFINLAR	22	<i>tetracycline hydrochloride</i>	8
<i>tafluprost</i>	70	TEVIMBRA	24
TAGRISSO	22	TEZSPIRE	73
TAKHZYRO	61	THALOMID	17
TALTZ	63	<i>theophylline</i>	72
TALVEY	19	<i>theophylline er</i>	72
TALZENNA	22	THIOLA EC	53
<i>tamoxifen citrate</i>	17	<i>thioridazine hydrochloride</i>	26
<i>tamsulosin hydrochloride</i>	53	<i>thiotepa</i>	16
<i>tarina 24 fe</i>	58	<i>thiothixene</i>	26
<i>tarina fe 1/20 eq</i>	58	THYMOGLOBULIN	62
TASIGNA	22	THYROID	60
<i>tasimelteon</i>	73	<i>tiadylt er</i>	38
TAVNEOS	63	<i>tiagabine hydrochloride</i>	10
<i>taysofy</i>	58	TIBSOVO	22
<i>tazarotene</i>	43	TICE BCG	19
<i>tazicef</i>	6	TICOVAC	65
<i>taztia xt</i>	38	<i>tigecycline</i>	5
TAZVERIK	22	<i>tilia fe</i>	58
TDVAX	65	<i>timolol maleate</i>	14
TECENTRIQ	24	<i>timolol maleate</i>	69
TECENTRIQ HYBREZA	24	<i>timolol maleate ophthalmic gel forming</i>	69
TECVAYLI	19	<i>tinidazole</i>	5
TEFLARO	6	<i>tiopronin</i>	53
<i>telmisartan</i>	35	<i>tiopronin dr</i>	53
<i>telmisartan/hydrochlorothiazide</i>	39	<i>tiotropium bromide</i>	71
<i>temazepam</i>	73		

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
<i>tis-u-sol</i>	68	TRESIBA	33
TIVDAK	24	TRESIBA FLEXTOUCH	33
TIVICAY	28	<i>tretinoin</i>	24
TIVICAY PD	28	<i>tretinoin</i>	43
<i>tizanidine hcl</i>	27	<i>triamcinolone acetonide</i>	44
<i>tizanidine hydrochloride</i>	27	<i>triamcinolone acetonide dental paste</i>	43
TOBI PODHALER	71	<i>triamterene</i>	39
<i>tobramycin</i>	69	<i>triamterene/hydrochlorothiazide</i>	39
<i>tobramycin</i>	71	<i>triazolam</i>	73
<i>tobramycin sulfate</i>	4	<i>triderm</i>	44
<i>tobramycin/dexamethasone</i>	69	<i>trientine hydrochloride</i>	49
TODAYS HEALTH ORIGINAL PEN	68	<i>tri-estarrylla</i>	58
NEEDLES 29G X 1/2"		<i>trifluoperazine hcl</i>	26
<i>tolcapone</i>	25	<i>trifluoperazine hydrochloride</i>	26
<i>tolterodine tartrate</i>	52	<i>trifluridine</i>	69
<i>tolterodine tartrate er</i>	52	<i>trihexyphenidyl hydrochloride</i>	25
<i>tolvaptan</i>	49	TRIJARDY XR	32
TOPIRAMATE	9	TRIKAFTA	71
<i>topiramate er</i>	9	<i>tri-legest fe</i>	58
<i>topotecan hcl</i>	20	<i>tri-linyah</i>	58
<i>topotecan hydrochloride</i>	20	<i>tri-lo-estarrylla</i>	58
<i>toremifene citrate</i>	17	<i>tri-lo-marzia</i>	58
TORISEL	22	<i>tri-lo-mili</i>	58
<i>torpenz</i>	22	<i>tri-lo-sprintec</i>	58
<i>torsemide</i>	39	<i>trimethoprim</i>	5
TOUJEO MAX SOLOSTAR	33	<i>tri-mili</i>	58
TOUJEO SOLOSTAR	33	<i>trimipramine maleate</i>	12
TRADJENTA	32	TRINTELLIX	12
<i>tramadol hcl er</i>	2	<i>tri-nymyo</i>	58
<i>tramadol hydrochloride</i>	3	TRISENOX	19
<i>tramadol hydrochloride er</i>	2	<i>tri-sprintec</i>	58
<i>tramadol hydrochloride/acetaminophen</i>	3	TRIUMEQ	29
<i>trandolapril</i>	36	TRIUMEQ PD	29
<i>trandolapril/verapamil hcl er</i>	39	<i>trivora-28</i>	58
<i>tranexamic acid</i>	35	<i>tri-vylibra</i>	58
<i>tranylcypromine sulfate</i>	11	<i>tri-vylibra lo</i>	58
TRAVASOL	48	TRIZIVIR	29
<i>travoprost</i>	70	TRODELVY	24
TRAZIMERA	24	TROGARZO	29
<i>trazodone hydrochloride</i>	12	TROPHAMINE	48
TREANDA	16	<i>trospium chloride</i>	52
TRECATOR	15	TRULICITY	32
TRELEGY ELLIPTA	73	TRUMENBA	65
TRELSTAR MIXJECT	61	TRUQAP	22
<i>treprostinil</i>	72	TRUXIMA	24

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
TUDORZA PRESSAIR	71	VANFLYTA	22
TUKYSA	22	VAQTA	66
TURALIO	22	<i>varenicline starting month</i>	4
<i>turqoz</i>	58	<i>varenicline tartrate</i>	4
TWINRIX	65	VARIVAX	66
TWIRLA	58	VARIZIG	62
TYBLUME	58	vasopressin	54
TYBOST	29	<i>vasopressin +rfid</i>	54
<i>tydemy</i>	58	<i>vasostrict</i>	54
TYENNE	63	VAXELIS	66
TYPHIM VI	66	VECTIBIX	24
TYSABRI	42	VEGZELMA	24
TYVASO	72	VEKLURY	30
TYVASO DPI INSTITUTIONAL KIT	72	VELCADE	19
TYVASO DPI MAINTENANCE KIT	72	VELIVET	58
TYVASO DPI TITRATION KIT	72	VELTASSA	49
TYVASO REFILL KIT	72	VEMLIDY	28
TYVASO STARTER KIT	72	VENCLEXTA	22
UDENYCA	35	VENCLEXTA STARTING PACK	22
UDENYCA ONBODY	35	VENLAFAXINE BESYLATE ER	12
ULTOMIRIS	63	<i>venlafaxine hydrochloride</i>	12
<i>unithroid</i>	60	<i>venlafaxine hydrochloride er</i>	12
UPTRAVI	72	VENTAVIS	72
UPTRAVI TITRATION PACK	72	<i>ventolin hfa</i>	71
<i>ursodiol</i>	50	<i>venxxiva</i>	53
VABYSMO	69	VEOZAH	42
<i>valacyclovir hydrochloride</i>	30	<i>verapamil hcl</i>	38
VALCHLOR	16	<i>verapamil hcl er</i>	38
<i>valganciclovir</i>	28	<i>verapamil hcl sr</i>	38
<i>valganciclovir hydrochloride</i>	28	<i>verapamil hydrochloride</i>	38
<i>valproate sodium</i>	9	<i>verapamil hydrochloride er</i>	38
<i>valproic acid</i>	9	VERQUVO	41
<i>valrubicin</i>	19	VERSACLOZ	27
<i>valsartan</i>	35	VERZENIO	22
<i>valsartan/hydrochlorothiazide</i>	39	<i>vestura</i>	58
VALSTAR	19	VIBERZI	50
VALTOCO 10 MG DOSE	10	VIBRAMYCIN	8
VALTOCO 15 MG DOSE	10	<i>vienna</i>	58
VALTOCO 20 MG DOSE	10	<i>vigabatrin</i>	10
VALTOCO 5 MG DOSE	10	<i>vigadrone</i>	10
<i>valtya 1/50</i>	58	VIGAFYDE	10
<i>vancomycin</i>	5	<i>vigpoder</i>	10
<i>vancomycin hcl</i>	5	<i>vilazodone hydrochloride</i>	12
<i>vancomycin hydrochloride</i>	5	VIMIZIM	52
<i>vancomycin hydrochloride/dextrose</i>	5	VIMKUNYA	66

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #	Drug Name	Page #
VIMPAT	10	XELJANZ XR	63
<i>vinblastine sulfate</i>	19	<i>xelria fe</i>	59
<i>vincristine sulfate</i>	19	XEMBIFY	62
<i>vinorelbine tartrate</i>	19	XEOMIN	27
<i>viorele</i>	58	XERAVA	8
VIRACEPT	30	XERMELO	50
VIREAD	29	XGEVA	67
VISTOGARD	68	XIAFLEX	52
VITRAKVI	22	XIFAXAN	50
VIVIMUSTA	16	XIGDUO XR	32
VIVITROL	3	XiIDRA	69
VIVOTIF	66	XOFLUZA	30
VIZIMPRO	22	XOLAIR	63
VOCABRIA	28	XOSPATA	22
<i>volnea</i>	58	XPOVIO	22
VONJO	19	XPOVIO 60 MG TWICE WEEKLY	22
VORANIGO	24	XPOVIO 80 MG TWICE WEEKLY	22
<i>voriconazole</i>	14	XTANDI	16
VOWST	50	<i>xulane</i>	59
VPRIV	52	XULTOPHY 100/3.6	32
VRAYLAR	27	XURIDEN	52
VUMERTY	42	<i>yargesa</i>	52
VYEPTI	14	YERVOY	24
<i>vyfemla</i>	58	YESINTEK	63
<i>vylibra</i>	58	YF-VAX	66
VYLOY	24	YONDELIS	16
VYNDAMAX	39	YONSA	16
VYNDAQEL	52	YUVAFEM	59
VYXEOS	18	<i>zafemy</i>	59
VYZULTA	70	<i>zafirlukast</i>	71
<i>warfarin sodium</i>	34	ZALTRAP	19
WELIREG	52	ZANOSAR	16
<i>wera</i>	58	ZEJULA	22
WEZLANA	63	ZELBORAF	22
WINRHO SDF	62	ZEMAIRA	52
<i>wixela inhub</i>	73	ZEMDRI	4
<i>wymzya fe</i>	58	<i>zenatane</i>	43
XALKORI	22	ZENPEP	52
<i>xarah fe</i>	59	ZEPATIER	28
XARELTO	34	ZEPOSIA	42
XARELTO STARTER PACK	34	ZEPOSIA 7-DAY STARTER PACK	42
XATMEP	64	ZEPOSIA STARTER KIT	42
XCOPRI	10	ZEPZELCA	16
XDEMVY	69	<i>zidovudine</i>	29
XELJANZ	63	ZIEXTENZO	35

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025

Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Page #
ZIIHERA	24
<i>ziprasidone hcl</i>	27
<i>ziprasidone mesylate</i>	27
ZIRGAN	69
ZOLADEX	61
<i>zoledronic acid</i>	67
ZOLINZA	19
<i>zolmitriptan</i>	15
<i>zolpidem tartrate</i>	73
ZONISADE	10
<i>zonisamide</i>	10
<i>zovia 1/35</i>	59
ZTALMY	10
<i>zumandimine</i>	59
ZURZUVAE	11
ZYDELIG	23
ZYKADIA	23
ZYNLONTA	24
ZYNYZ	24
ZYPREXA RELPREVV	27

Formulary ID: 25411, Version: 17, Effective Date: 07/01/2025
 Last Updated: 06/03/2025

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Multi-Language Insert

Multi-Language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at (877) 210-9167 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al (877) 210-9167 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

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German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher

erreichen Sie unter (877) 210-9167 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 (877) 210-9167 (TTY: 711)번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону (877) 210-9167 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي سؤال تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على (877-210-9167)TTY:711 . سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए बस हमें (877) 210-9167 (TTY: 711) पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero (877) 210-9167 (TTY: 711). Un nostro incaricato che parla Italiano fornirà l'assistenza necessaria. È un servizio gratuito.

Portugués: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número (877) 210-9167 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan (877) 210-9167 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub



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OMB #0938-1421

dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer (877) 210-9167 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康保険と薬品処方薬プランに関するご質問にお答えするため、無料の通訳サービスがあります。通訳をご用命になるには、(877) 210-9167 (TTY: 711)にお電話ください。日本語を話す人が支援いたします。これは無料のサービスです。

Form CMS-10802
(Expires 12/31/25)

Discrimination is Against the Law

FirstCarolinaCare Insurance Company complies with applicable Federal Civil Rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes).

FirstCarolinaCare Insurance Company does not exclude people or treat them differently because of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes).

FirstCarolinaCare Insurance Company provides free aids and services to people with disabilities to communicate effectively with us, such as:

Qualified sign language interpreters.

Written information in other formats (large print, audio, accessible electronic formats, other formats).

Provides free language services to people whose primary language is not English, such as:

Qualified interpreters.

Information written in other languages.

If you need these services, contact Customer Service. If you believe that FirstCarolinaCare Insurance Company has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes), you can file a grievance with: FirstCarolinaCare Insurance Company, Customer Service, 3310 Fields South Drive, Champaign, Illinois 61822, telephone: (800) 481-1092, fax: (217) 902-9705, CustomerService@FirstCarolinaCare.com.

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Customer Service is available to help you.

You can also file a Civil Rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of
Health and Human
Services, 200
Independence Avenue
SW., Room 509F, HHS
Building, Washington,
DC 20201, (800) 368-
1019, (800) 537-7697
(TDD). Complaint forms

are available at

<http://www.hhs.gov/ocr/o>

<ffice/file/index.html>.FCC

Approved 07/2023

GNCMFC24-nondiscrimnt-0723

GNCMFC25-nondiscrimnt-0524 Y0094_25_118778_C

This formulary was updated on 08/23/24. For more recent information or other questions, please contact FirstCarolinaCare Member Services, at (855) 291-9336 (TTY users should call 711), 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit FirstCarolinaCare.com/NHHA.

